

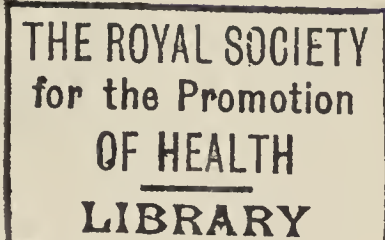


1956

NEW SOUTH WALES



18466



REPORT
OF THE
DIRECTOR-GENERAL
OF
PUBLIC HEALTH
NEW SOUTH WALES

1950

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DEPARTMENT OF PUBLIC HEALTH, NEW SOUTH WALES.

OFFICE OF THE DIRECTOR-GENERAL OF PUBLIC HEALTH,

93 Macquarie Street and 52 Bridge Street, Sydney.

Members of the State Board of Health, 1950.

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Secretary.—GORDON LOUGHREY.

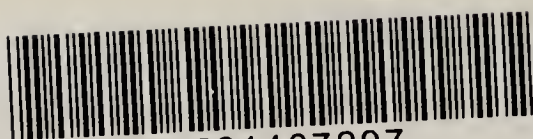
Divisions and Branches.

The following divisions are controlled by the Director-General of Public Health.—Maternal and Baby Welfare; Tuberculosis; Social Hygiene; Industrial Hygiene; Government Medical Officers for Sydney; Medical Officers of Health, Metropolitan, Newcastle, South Coast, Mitchell, Richmond-Tweed and Broken Hill Districts, Microbiological Laboratory, Chemical Laboratory; Health Education; Pure Food; Sanitation, &c.

The Hospital Division comprises The David Berry Hospital, three State Hospitals and Homes, Waterfall Sanatorium (Tuberculosis) and Auxiliary at Randwick, Strickland Convalescent Hospital, Vaucluse.

Legislative Enactments.

The Minister of Health is charged with the administration of the following Acts, for the promotion of the public health, execution of which is left to the Director-General of Public Health and the staff working under his control:—Food Preservation by Sulphur Dioxide Enabling Act, 1920; Noxious Trades Act, 1902; Private Hospitals Act, 1908; Public Health Acts, 1902-1944; Pure Food Act, 1908; King George V and Queen Mary Maternal and Infant Welfare Foundation Act, 1937. Burials in closed cemeteries and the exhumation of bodies for the purpose of re-interment, &c., are also dealt with.



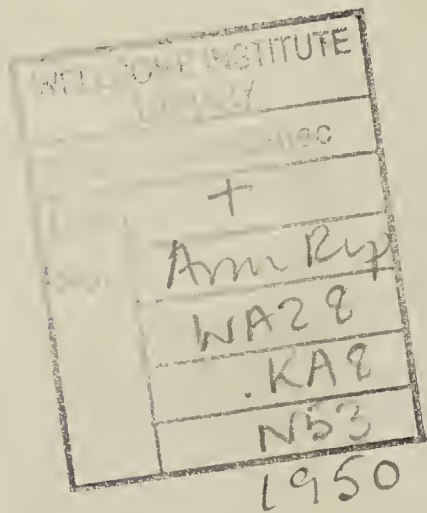
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Report of the Director-General of Public Health to the Honourable Minister for Health (The Hon. M. O'Sullivan, M.L.A.)

Sir,

I have the honour to present my report on the work of this office for the year ended 31st December, 1950.

Vital Statistics.

Vital statistics of New South Wales for the year 1950 have been prepared by the Government Statistician, Mr. S. R. Carver, who points out that the Sixth Revision of the "International Lists of Diseases and Causes of Death" was used for the first time in classifying causes of death for 1950. This has given the advantage of international comparison, but the change has the disadvantage of breaking comparison with past years. However, to smooth transition from the old to the new basis and to provide a link between the past and future, the deaths for 1950 have been classified according to the old and the new bases.

The population at the end of 1950 was 3,278,026. During the year, the increase in population by excess of births over deaths was 40,627 and by migration 61,464. The total number of live births was 71,592 (rate 22.20 per 1,000 mean population). Deaths numbered 30,965 equivalent to a rate of 9.60 per 1,000 of population. The infantile mortality rate was 27.04 per 1,000 live births.

Infectious Diseases.

Typhoid Fever.—16 cases (4 deaths) were notified, compared with 8 cases (no deaths) in 1949.

Scarlet Fever.—1,052 cases (1 death) were notified compared with 1,514 cases (3 deaths) in 1949.

Diphtheria.—390 cases (24 deaths) in 1950 compared with 627 cases (36 deaths) in 1949.

Infantile Paralysis.—789 cases (55 deaths) were notified in 1950—an epidemic rise in incidence compared with 182 cases (8 deaths) in 1949 and 87 cases (no deaths) in 1948.

Tuberculosis Division.

The total of notifications for all forms of tuberculosis during the year was 1,787, an increase of 146 over those of the previous year. Deaths from all forms of tuberculosis in 1950 numbered 671, equivalent to a rate per 100,000 population of 20.86, the lowest ever recorded in New South Wales. Eleven clinics operated throughout the year, and all clinics and hospitals dealing with tuberculosis are functioning on a satisfactory basis. The number of x-rays taken at clinics and the private group service showed a substantial increase. B.C.G. vaccination has been undertaken at Royal North Shore Hospital, Canterbury District Hospital, Albion Street Clinic, Red Cross Clinic, Waterfall Sanatorium and Randwick Auxiliary Hospital.

Division of Social Hygiene.

The total number of notifications of venereal disease for this year is the lowest recorded since the Venereal Diseases Act, 1918, came into force in December, 1920. The decline in the yearly totals of notifications has continued since 1945 and the total for 1950 is 54.6 per cent. below that for 1946 and 19.4 per cent. below that of 1949. There has also been a decline in the number of persons seeking for the first time, examination and treatment at the Divisional Clinic. The prophylactic facilities of this clinic continue to be used by a large number of males and 17,423 treatments were given during the year. Action was taken against 400 persons for breach of section 5 of the Act (failure to continue under treatment).

Chemical Laboratory.

The Government Analyst presents a statistical report of the work of the Chemical Laboratory where the number of samples examined in 1950 amounted to 27,333. Of a total number of samples of milk examined in connection with the administration of the Pure Food Act, 572 (3.38 per cent.) were found to be adulterated. Police authorities forwarded 190 exhibits for examination and coroners required the examination of 772 exhibits in connection with 311 deaths. Examinations were also done for various State and Municipal authorities.

Food Inspections.

A special food handling campaign has been inaugurated with the aim of improvement of the standards of hygiene and cleanliness in restaurants, hotels and cafes, especially with regard to the cleansing of eating and drinking utensils. This campaign will be continued and expanded in the coming year.

A total of 7,040 samples were taken for analyses by departmental inspectors; 159 warnings were issued, 330 prosecutions were undertaken and £1,600 19s. 6d. was collected in fines and costs.

The Chief Food Inspector points out that the establishment of the branch has remained unchanged since 1920 and asks for an increase in the number of inspectors to police effectively the provisions of the Pure Food Act.

Private Hospitals.

Once again there has been a decrease in the number of licensed hospitals and this for 1950 was a loss of thirty-three hospitals representing a loss of 254 beds. No hospital controlled by the Bush Nursing Association or the Country Women's Association was closed permanently during the year. Supervision of private hospitals has been fully maintained during the year but the shortage of labour and materials has greatly delayed the required improvements and renovations. Overcrowding is the most frequent infringement of the clauses of the Private Hospitals Act.

Sanitation Branch.

In August a senior tracer was appointed to the branch to assist with the greatly increased volume of plans, search and other work relating to land notified as unhealthy building land under the Public Health Act. Seven hundred and fourteen inspections of noxious trades premises were made and the provisions of the Act were extended to the Municipality of Deniliquin.

Eleven local government councils were requested to appoint certificated health inspectors following investigations of their respective areas.

Fourteen prosecutions were instituted for breaches of various Acts, Regulations and Ordinances and fines and costs amounting to £102 12s. were imposed.

Medico-Legal Sections and Hospital Admission Depot.

The Government Medical Officers for Sydney and for Newcastle submit brief reports of the work done in their respective offices during 1950. In Sydney the number of vaccinations against smallpox showed a big increase as many of the vaccinations of intending travellers, formerly performed by Commonwealth Medical Officers, are now done by Departmental Medical Officers. In Sydney a total of 1,259 vaccinations were performed for the police force and the general public and an additional 493 International Certificates were issued confirming vaccinations by other medical practitioners. The Hospital Admission Depot continued to provide its service of arranging admissions to hospital and ambulance removals.

Consultative Council for the Physically Handicapped.

Dr. S. W. G. Rateliff was appointed Chairman of the Council in August, 1950, and during the year thirteen meetings of the Council and twelve of the executive Committee were held.

The increased incidence of poliomyelitis in New South Wales which started towards the end of last year continued throughout this year and rose rapidly in November and December. 68.2 per cent. of the total of 770 cases occurring in 1950 were under the age of 15 years. Fifty-one cases were fatal, and of these over 1 year old the greatest mortality was in 15-19 years age group. Information about the types of illness and severity is still being collected and will be incorporated in a later report. As a result of the epidemic there was an increased number of applications for financial and after-care assistance, and expenditure in these items amounted to £413 15s. 2d. Eight persons were assisted under the Vocational Training Grant, and the expenditure in this amounted to £259 7s. 2d.

Pathological Laboratories.

The number of laboratory examinations carried out during the year was approximately the same as last year, and the revenue collected from charges for these, sales of media, etc., was £540 17s. 6d. During the year there has been an increase in the total number of examinations in connection with *Salmonella* infections and the laboratory assisted in the detection of a typhoid carrier in a small outbreak in the New Hebrides.

Shortage of guinea pigs hampered to some extent, the performance of diphtheria virulence tests and the examination of milk for tuberculosis and *Brucella Abortus*.

The overcrowded conditions of the Laboratory greatly hinder the present amount of work carried out and make impossible any extension of the laboratory's activities.

Division of Industrial Hygiene.

Dr. C. J. Cummins, who was appointed Director in February, 1950, in his comprehensive report of the year's activities, states there was a marked increase in the amount of work carried out by the Division. This was due largely to its functions becoming more widely known and appreciated by both employer and employee organisations. The health survey in the gas industry in New South Wales, requested by the Royal Commission of Inquiry into the industry in 1949, is well advanced and some preliminary reports have been submitted. It is hoped to complete the survey by March, 1951. Four members of the Division attended the I.L.O. Conference of Experts in Pneumoconiosis held at Sydney in February.

Division of Maternal and Baby Welfare

Ten pre-natal clinics are now conducted at Baby Health Centres in the metropolitan area and total attendances at these showed an increase of 6,048 on the previous year. Three departmental dietitians visit eight of these clinics regularly, and the nutritional instruction given is a very important factor in the prevention and control of toxæmia of pregnancy. This year a new mobile blood transfusion unit was established at St. George Hospital. During the year, it was arranged for twenty-one hospitals to supply plasma as required in urgent cases. The Maternal Mortality rate, including Criminal Abortion for 1950, was the lowest on record, but the Division is not complacent about this, as toxæmia of pregnancy is still the cause of the majority of maternal deaths.

Eleven new buildings were completed and operated as Baby Health Centres during the year and the pre-school child health service was continued.

Health Education.

The amount of money made available for health education purposes in 1950 was £10,000, but rising costs severely limited the activities of the Publicity Branch. Features of the year's work were the poliomyelitis publicity campaign and the food handling campaign. The Branch gave assistance to thirty metropolitan and thirty-eight country councils in their "Health Weeks" and was a major exhibitor at the Sydney Health Week exhibition. The branch had another successful year in the use of films for educational purposes.

Nutrition Section.

Nutrition education was conducted by the dietitians by the preparation of press articles, radio scripts, leaflets, answers to enquiries and lectures. At some of the State Hospitals and Institutions, the food services were reported on and assistance given. In collaboration with the Director of Maternal and Baby Welfare, menus and recipes for feeding children in migrant camps were prepared for the Commonwealth Department of Labour and National Service. Among other activities, the secretarial work of the N.S.W. Institute of Dietitians is done within this Section.

School Medical Service.

During 1950, the number of full-time medical officers in this Service was six short of that establishment (twenty-nine). There are also employed: 3 part-time medical officers, 14 school nurses, 1 speech therapist, and 4 psychologists, and 4 social workers have been seconded from the Education Department.

Four Child Guidance Clinics continued to carry out the examination and investigation of children referred by parents, Education Department, Child Welfare Department, Children's Court, and other bodies and authorities.

Hearing surveys have been conducted in metropolitan and country districts, and particular attention has also been given to children in the Departmental Opportunity Deaf Classes.

An asthma survey has shown the important part played by colds in the ill-health of asthmatic children and the good results that can be obtained by bringing these colds under control.

Division of Dental Services.

The establishment for this Division provides for twenty-two dental officers and twelve dental assistants, and most of the work of the Division is connected with the School Dental Service. Further consideration has been given to the provision of a more adequate dental service for the schools by the appointment and training of dental hygienists on lines similar to those in operation in New Zealand.

The Dental Service to State Hospitals and Homes and State Penitentiaries has been improved by the appointment of three full-time dental officers, and by providing better accommodation and modern equipment.

Health Districts.

Metropolitan Health District.—The Medical Officer of Health reports that the excessive rains of 1950 caused considerable dislocation of the sanitary services in the outer suburbs where sewers have not yet been constructed. In spite of this there was not any marked outbreak of intestinal disease, only six cases of typhoid being reported.

In the huge housing programme undertaken by the Housing Commission there has been a failure to plan for the sanitary drainage of the new estates and this has given much concern to this office, but action, as the result of recent conferences arranged between the interested authorities, will, it is hoped, prevent these problems arising in future in housing estates in unsewered areas.

Cases in the poliomyelitis epidemic in the metropolitan area occurred in fairly regular numbers throughout the year with no district specially marked out.

Hunter River Health District.—This district also experienced the State-wide increase in poliomyelitis incidence, ninety-five cases (eight deaths) being reported, compared with ten cases (one death) in 1949.

B.C.G. vaccination of child contacts of tuberculosis cases was begun last July.

There were 8,793 attendances at the Chest Clinic in 1950, as compared with 1,996 in 1949.

Rapid development is occurring in the unsewered outskirts of Newcastle, resulting in need for extension of scavenging services and creating problems in regard to sullage disposal.

South Coast Health District.—One hundred and seventeen cases, with six deaths of infectious diseases, were notified for the year, compared with ninety-three cases and three deaths in 1949. This increase was mainly due to rises in the number of cases of diphtheria (twenty-seven compared with sixteen) and of poliomyelitis (thirty-nine cases, one death, compared with six cases). The majority of cases of poliomyelitis occurred in the two most densely populated sections of the Health District, viz., the Sutherland Shire and the City of Greater Wollongong. The work of this office has increased noticeably during the year and the routine work of inspections, investigations of complaints, and supervision of sanitary matters generally, has been heavy.

Mitchell Health District.—During the year, the Medical Officer of Health, because of the lack of housing accommodation, has retained his headquarters in Sydney and has visited the district on a part-time basis. In this district during the year, there was a great increase in the number of cases of scarlet fever and of poliomyelitis. The provisions of the Noxious Trades Act were extended to Lyndhurst Shire in December. In a tuberculosis survey, in the district carried out by the Anti-T.B. Association, a relatively high percentage of patients showing radiological evidence of tuberculosis was found at Orange Mental Hospital.

Richmond-Tweed Health District.—In his third annual report the Medical Officer of Health reports that floods during the year dislocated sanitary services in many places, but these were put back in operation in a very short time by the local authorities, and in connection with these conditions, there was no increase in notifiable infectious diseases. Seven cases of poliomyelitis occurred, six of them during the last months of the year, and it would appear that the epidemic of this disease is about to spread from the southern districts to this area. It is felt that improvement in the sanitation of this District has continued during the year.

Broken Hill and District.—The Medical Officer of Health's report is for the year ended 30th June, 1950.

The incidence of notifiable infectious diseases in this District for the year ended 31st December, 1950, is shown in Tables VI, VII, VIII and IX in the Government Statistician's section of the general report.

E. SYDNEY MORRIS,
Director-General of Public Health.

VITAL STATISTICS OF NEW SOUTH WALES FOR THE YEAR 1950.

(Prepared by the Government Statistician, Mr. S. R. Carver.)

Population:

The population at the end of 1950 was 3,278,026, of whom 1,649,479 were males and 1,628,547 females. During the year the increase in population by excess of births over deaths was 40,627, and by migration 61,464, making a total increase for the year of 102,091. The mean population for the year 1950 was 3,224,892.

Live Births:

The total number of live births was 71,592, equivalent to 22.20 per 1,000 of mean population, which rate is 0.4 per cent. below the average of the previous five years. Of this number, 36,783 were males, and 34,809 were females, the proportion being 105.67 males to 100 females.

Dividing the State into the Metropolis and the Remainder of the State, there were 29,643 births to mothers resident in the former and 41,949 in the latter, corresponding to rates of 18.92 and 25.30 respectively.

Stillbirths:

The number of stillbirths registered was 1,406 (786 males and 620 females) which is 1.93 per cent. of all births, live and still, and equal to 0.44 per 1,000 population. In the Metropolis there were 570 stillbirths, and in the Remainder of the State, 836, representing 1.89 and 1.95 per cent. of all births, live and still, in the respective divisions.

Deaths.

The deaths during the year numbered 30,965, equivalent to a rate of 9.60 per 1,000 of population. This rate is 0.1 per cent. above the average of the previous five years.

The total includes 17,565 males and 13,400 females, equivalent to a rate of 10.83 and 8.36 respectively per 1,000 of mean population. The rate in the Metropolis was 10.44 per 1,000, and in the Remainder of the State, 8.81.

Of the 30,965 people who died during the year, 2,364 were under 5 years of age 11,353 were aged 5 to 64 years, and 17,248 were 65 years and over. The rates per 1,000 of population in the main groups under and over 5 years were 7.01 and 9.91.

Infantile Mortality.

The number of children under 1 year of age who died was 1,936, equal to 27.04 per 1,000 live births. To this total the Metropolis contributed 754 or 25.44 per 1,000 live births, and the Remainder of the State 1,182 or 28.18 per 1,000 live births. The rate for 1950 is 9 per cent. below the average of the previous five years. Of the deaths under 1 year of age, 1,157 or 60 per cent. occurred under one week; 1,345 or 69 per cent. under 1 month, and 1,510 or 78 per cent. under three months.

Causes of Deaths, New South Wales, 1950.

Classified in accordance with the *Sixth Revision* of the International Lists of Diseases and Causes of Death.

The statistics of causes of death for the year 1950, shown on pages 1 to 5 hereof, compiled in accordance with the *Sixth Revision* of the International Lists of Diseases and Causes of Deaths, are not comparable with similar statistics for the years 1940 to 1949 compiled in accordance with the *Fifth Revision* of the International Lists. Apart from the changes in the allocation of diseases to the various categories, and of categories to the various sections of the classification, apparent from scrutiny of the respective International Lists, the *Sixth Revision* places much greater emphasis than was hitherto the case upon the order of occurrence of a disease in the sequence of events leading to death, as stated in the death certificate, in deciding the order of preference between causes of death, where a joint cause is given. This latter change in method of classification has affected the comparability of the statistics for the different years to a significant extent.

The principal causes of death in 1950 are shown in the statement on pages 8-10, and reference is made below to the more prominent of these causes.

Infective and Parasitic Diseases (International Code Nos. 001-138).—Deaths in 1950 from infective and parasitic diseases numbered 1,037, representing a rate of 322 per million of mean population. Included in this section is tuberculosis (Code Nos. 001-019), which was responsible for 671 of the deaths, equal to a rate of 208 per million of mean population. The deaths from tuberculosis comprised 634 from tuberculosis of the respiratory system (Code Nos. 001-008) and 37 from other forms of tuberculosis (Code Nos. 010-019), the rates per million of mean population being 197 and 11 respectively.

Of the persons dying from tuberculosis of the respiratory system, 461 were males and 173 females, the rates per million of each sex being 284 and 108 respectively.

Under the *Sixth Revision* of the International Lists, the disease influenza is allocated to the section "Diseases of the Respiratory System" instead of, as formerly, to "Infective and Parasitic Diseases".

Malignant Neoplasms (Code Nos. 140-199) and *Neoplasm of Lymphatic and Haematopoietic Tissue* (Code Nos. 200-205).—Deaths from the above causes numbered 3,985, equal to a rate of 1,236 per million of mean population. The deaths of males numbered 2,058 and of females 1,927, the rates per million of each sex being 1,269 and 1,202 respectively. Of the total deaths, malignant neoplasms caused 3,742 and neoplasm of lymphatic and haematopoietic tissue 243, the mortality rate being 1,160 and 76 per million respectively.

Neoplasms of lymphatic and haematopoietic tissue are a new grouping and include certain diseases not formerly regarded as neoplasms. Hodgkin's disease and mycosis fungoides were formerly classified as infective and parasitic diseases, and leukaemia and aleukaemia as diseases of blood and blood forming organs.

Vascular Lesions affecting central nervous system (Code Nos. 330-334).—In 1950, vascular lesions affecting the central nervous system caused 3,765 deaths, equal to a rate of 1,167 per million of mean population. This total comprised the following—

International Code No.	Cause.	Number of Deaths.
330	Subarachnoid haemorrhage	127
331	Cerebral haemorrhage	2,273
332	Cerebral embolism and thrombosis	1,158
334	Other and ill-defined vascular lesions affecting central nervous system.	207
	Total	3,765

Of the total, 1,704 were males and 2,061 females, corresponding respectively to rates of 1,051 and 1,285 per million of mean population.

Diseases of the Circulatory System (Code Nos. 400-468).—Diseases of the circulatory system were the cause of 11,522 deaths, the rate being 3,573 per million of mean population. Of the total, 6,838 were males and 4,684 females, corresponding respectively to rates of 4,218 and 2,921 per million of each sex.

Of the total deaths due to diseases of the circulatory system, rheumatic fever and chronic rheumatic heart disease (Code Nos. 400-416) caused 310, equal to a rate of 96 per million.

Arteriosclerotic and degenerative heart disease (Code Nos. 420-422) accounted for 8,175 deaths, the mortality rate being 2,535 per million of mean population, deaths of males from this cause numbering 4,992 and females 3,183, the corresponding rates being 3,079 and 1,985 per million of each sex.

Other diseases of the heart (Code Nos. 430-434) caused 1,104 deaths, equal to a rate of 342 per million.

Hypertensive disease (Code No. 440-447) caused 1,254 deaths, the rate being 389 per million.

Deaths due to other diseases of the circulatory system numbered 679, equal to a rate of 211 per million.

Bronchitis (Code Nos. 500-502) and *Pneumonia* (Code Nos. 490-493).—In 1950, bronchitis was the cause of 403 deaths, comprised of 282 males and 121 females. Corresponding rate for males was 174, for females 75 and for persons 125 per million of mean population.

Of the 1,058 deaths from pneumonia, 617 were of males and 441 of females, and respective rates were 328, 381 and 275 per million of mean population.

Nephritis and Nephrosis (Code Nos. 590-594).—During the year there were 1,073 deaths due to diseases of the genito-urinary system (Code Nos. 590-637), of which 697 were caused by nephritis and nephrosis. The mortality rate for nephritis and nephrosis was 216 per million of mean population, for males 222 per million, and for females 210 per million.

Mortality of Infants.—The table on page 5 shows the number of deaths of children under 1 year of age and mortality rate per 1,000 live births for the principal causes of deaths.

Causes of Death,* New South Wales, 1950.

Inter- national Code No.	Cause of Death.	Number of Deaths.		
		Males.	Females.	Persons.
001-138	INFECTIVE AND PARASITIC DISEASES	712	325	1,037
001-008	Tuberculosis of respiratory system	461	173	634
010	Tuberculosis of meninges and central nervous system	13	8	21
011-019	Tuberculosis, other forms	10	6	16
020-029	Syphilis and its sequelae	66	21	87
040-041	Typhoid and paratyphoid fever	2	2	4
045-048	Dysentery.....	7	4	11
050	Scarlet fever.....	...	1	1
052	Erysipilas	2	1	3
055	Diphtheria	13	11	24
056	Whooping cough	3	4	7
057	Meningococcal infections	25	16	41
061	Tetanus.....	17	8	25
080	Acute poliomyelitis	36	19	55
081	Late effects of acute poliomyelitis .....	...	...	...
082	Acute infectious encephalitis.....	3	5	8
083	Late effects of acute infectious encephalitis	1	2	3
085	Measles	11	14	25
092	Infectious hepatitis	10	9	19
...	Other infective and parasitic diseases	32	21	53
140-239	NEOPLASMS	2,136	2,032	4,168
140-199	Malignant neoplasms	1,918	1,824	3,742
200-205	Neoplasm of lymphatic and haematopoietic tissue	140	103	243
214-239	Other neoplasms	78	105	183
240-289	ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES	273	377	650
260	Diabetes mellitus	135	254	389
280-286	Avitaminoses and nutritional deficiency states	11	12	23
...	Other allergic, endocrine system, metabolic, and nutritional diseases	127	111	238
290-299	DISEASES OF THE BLOOD AND BLOOD FORMING ORGANS	65	97	162
300-326	MENTAL, PSYCHONEUROTIC AND PERSONALITY DISORDERS	122	64	186
330-398	DISORDERS OF THE NERVOUS SYSTEM AND SENSE ORGANS	1,975	2,310	4,285
	Vascular lesions affecting central nervous system—			
331	Cerebral haemorrhage	1,046	1,227	2,273
332	Cerebral embolism and thrombosis	514	644	1,158
330-333, 334	Other.....	144	190	334
340	Meningitis, except meningococcal and tuberculous	32	37	69
343	Encephalitis, myelitis and encephalomyelitis (except acute infectious)	26	15	41
341-342 } 344-398 }	Other disorders of the nervous system and sense organs	213	197	410
400-468	DISEASES OF THE CIRCULATORY SYSTEM	6,838	4,684	11,522
400-416	Rheumatic fever and chronic rheumatic heart disease	153	157	310
420-422	Arteriosclerotic and degenerative heart disease	4,992	3,183	8,175
430-434	Other diseases of the heart	712	392	1,104
440-447	Hypertensive disease	661	593	1,254
450-456	Diseases of arteries	301	325	626
460-468	Diseases of veins and other diseases of circulatory system	19	34	53
470-527	DISEASES OF THE RESPIRATORY SYSTEM	1,227	757	1,984
480-483	Influenza	69	78	147
490-493	Pneumonia	617	441	1,058
500-502	Bronchitis.....	282	121	403
470-475 } 510-527 }	Other diseases of the respiratory system	259	117	376
530-587	DISEASES OF THE DIGESTIVE SYSTEM	698	451	1,149
540-545	Diseases of stomach and duodenum	180	31	211
550-553	Appendicitis	40	29	69
560-561	Hernia of the abdominal cavity	62	37	99
570	Intestinal obstruction without mention of hernia	82	76	158
571	Gastro-enteritis and colitis except ulcerative, age four weeks and over	75	64	139
572	Chronic enteritis and ulcerative colitis	26	27	53
576-577	Peritonitis and peritoneal adhesions	9	7	16
581	Cirrhosis of liver	112	40	152
...	Other diseases of digestive system	112	140	252
590-637	DISEASES OF GENITO-URINARY SYSTEM	651	422	1,073
590-594	Nephritis and nephrosis	360	337	697
610-612	Diseases of the prostate	198	...	198
600-609 } 613-637 }	Other diseases of the genito-urinary system	93	85	178
640-689	DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND PUERPERIUM .....	...	80	80
640-649	Complications of pregnancy .....	...	28	28
650-652	Abortion—			
6502-6512 } 6522 }	Criminal .....	...	10	10
...	Other.....	...	4	4
670-678	Complications of delivery .....	...	26	26
680-689	Complications of puerperium .....	...	12	12
690-716	DISEASES OF THE SKIN AND CELLULAR TISSUE	23	17	40
720-749	DISEASES OF THE BONES AND ORGANS OF MOVEMENT	30	53	83
750-759	CONGENITAL MALFORMATIONS	177	147	324
760-776	CERTAIN DISEASES OF EARLY INFANCY	707	484	1,191
760-761	Injury at birth	161	92	253
762	Postnatal asphyxia and atelectasis	63	53	116
776	Immaturity unqualified	279	204	483
763-775	Other diseases of early infancy	204	135	339
780-795	SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS	496	573	1,069
794	Senility without mention of psychosis.....	396	504	900
780-793, 795	Other symptoms and ill-defined conditions	100	69	169
E800-E999	ACCIDENTS, POISONINGS AND VIOLENCE	1,435	527	1,962
E800-E936	Accidents	1,184	419	1,603
E970-E979	Suicide	225	92	317
E940-E965 } E980-E999 }	Other violence	26	16	42
	All Causes	17,565	13,400	30,965

* Based on Sixth Revision (1948) of the International Lists of Diseases and Causes of Death.

The causes of death in the preceding table have been compiled according to the sixth revision of the International List. For purposes of comparison a similar table has been drawn up for 1950 showing the causes of death as elassified according to the fifth revision (1938) of the International List. The fifth revision has been used in previous reports for such classifications.

Causes of Death,* New South Wales, 1950.

Cause of Death.*	Number 1950.	Average Annual Number 1945-49. (a)	Increase or Decrease (—) in 1950. (b)
			per cent.
Typhoid Fever (including Paratyphoid)	4	2	165
Cerebrospinal (meningococcal) Meningitis	41	30	36
Scarlet Fever	1	4	(—) 76
Whooping Cough	7	37	(—) 81
Diphtheria	25	60	(—) 58
Erysipelas	2	3	(—) 38
Tetanus	25	28	(—) 12
Tuberculosis of the Respiratory System	652	842	(—) 23
Tuberculosis of Meninges and Central Nervous System	20	23	(—) 12
Other Tuberculous Diseases	17	39	(—) 57
Dysentery	11	10	11
Syphilis	99	139	(—) 29
Influenza with respiratory complications specified	90	53	71
Influenza without respiratory complications specified	45	42	8
Measles	26	26	(—) 1
Acute Poliomyelitis and Acute Polioencephalitis (notifiable and non-notifiable forms)	56	28	99
Acute Infectious Encephalitis (lethargic or epidemic) (notifiable and non-notifiable forms)	8	10	(—) 17
Other Infective and Parasitic Diseases.....	105	94	12
Cancer	3,925	3,851	2
Diabetes Mellitus	552	575	(—) 4
Other General Diseases	387	410	(—) 6
Vitamin-Deficiency Diseases	7	2	195
Diseases of the Blood	268	268	...
Chronic Poisoning and Intoxication	105	63	66
Encephalitis and Meningitis (non-epidemic)	94	97	(—) 3
Cerebral Haemorrhage	2,348	2,288	3
Cerebral Embolism, Thrombosis, Softening and Hamiplegia	1,163	1,044	11
Other Intracranial Effusions	12	11	9
Infantile Convulsions	10	13	(—) 20
Other Diseases of the Nervous System.....	382	370	3
Diseases of the Heart	10,478	10,121	4
Arteriosclerosis and Other Diseases of Arteries	632	581	9
Other Diseases of the Circulatory System	207	139	49
Bronchitis	309	242	28
Pneumonia	1,203	1,325	(—) 9
Other Diseases of the Respiratory System	396	360	10
Diseases of the Stomach	150	167	(—) 10
Diarrhoea and Enteritis—Under 2 years	130	101	29
Diarrhoea and Enteritis—2 years and over	71	80	(—) 12
Appendicitis	74	112	(—) 34
Hernia, Intestinal Obstruction	249	268	(—) 7
Cirrhosis of the Liver	173	126	38
Peritonitis (without specified cause)	14	22	(—) 36
Other Diseases of the Digestive System	355	366	(—) 3
Nephritis	1,131	1,242	(—) 9
Other Diseases of the Genito-Urinary System	352	352	...
Criminal Abortion	10	14	(—) 31
Puerperal Septicaemia and Post-abortive Sepsis	6	9	(—) 32
Puerperal Thrombophlebitis, Embolism and Sudden Death (Sepsis)	10	13	(—) 20
Other Puerperal Diseases	54	86	(—) 37
Congenital Malformations	332	359	(—) 8
Congenital Debility	31	46	(—) 33
Premature Birth	634	698	(—) 9
Other Diseases peculiar to the First Year of Life	445	490	(—) 9
Senility	912	1,076	(—) 15
Suicide	317	324	(—) 2
Accident	1,614	1,543	5
Other Violence	33	46	(—) 28
All Other Causes	156	162	(—) 4
Total	30,965	30,932	...

(a) Adjusted to the mean population of 1950, viz., 3,224,892.

(b) The percentage increase or decrease is calculated from the precise average for 1945-49 and not from the adjusted whole number shown here. When the number of deaths is small a difference in the percentages on the two bases is apparent.

*Classified on the basis of the Fifth Revision (1938) of the International List.

Causes of Death* of Infants under 1 year of age, New South Wales, 1950.

International Code Number.	Cause of Death.	Number of Deaths.			Rate per 1,000 Live Births.		
		Males.	Females.	Persons.	Males.	Females.	Persons.
001-019	Tuberculosis .....	...	2	2	...	0·06	0·03
020-029	Syphilis and its sequelae .....	...	...	...	...	...	...
057	Meningococcal infections	5	4	9	0·14	0·11	0·12
080-081	Poliomyelitis	2	...	2	0·05	...	0·03
082-083	Infectious encephalitis .....	...	...	...	...	...	...
030-056, 058-074, 084-138	Other infective and parasitic diseases	14	12	26	0·38	0·34	0·36
340	Meningitis, except meningococcal and tuberculous	17	16	33	0·46	0·46	0·46
490-493	Pneumonia (age 4 weeks and over)	64	55	119	1·74	1·58	1·66
500-502	Bronchitis.....	11	5	16	0·30	0·14	0·22
571	Gastro-enteritis and colitis, except ulcerative (age 4 weeks and over)	43	38	81	1·17	1·09	1·13
750-759	Congenital malformations	135	115	250	3·67	3·30	3·49
7600, 7610	Injury at birth, without mention of immaturity	112	65	177	3·05	1·87	2·47
7605, 7615	Injury at birth, with immaturity	49	27	76	1·33	0·78	1·06
7620	Postnatal asphyxia and atelectasis, without mention of immaturity.....	43	42	85	1·17	1·21	1·19
7625	Postnatal asphyxia and atelectasis, with immaturity	20	11	31	0·54	0·32	0·43
7630	Pneumonia of newborn, without mention of immaturity.....	32	23	55	0·87	0·66	0·77
7635	Pneumonia of newborn, with immaturity	2	8	10	0·05	0·23	0·14
7640	Diarrhoea of newborn, without mention of immaturity	8	4	12	0·22	0·11	0·17
7645	Diarrhoea of newborn, with immaturity .....	...	...	...	...	...	...
7650, 7660, 7670, 7680, 7690-7694, 7700-7702, 7710, 7720, 7730.	Other diseases of early infancy, without mention of immaturity	93	55	148	2·53	1·58	2·07
7655, 7665, 7675, 7685, 7695-7699, 7705-7707, 7715, 7725, 7735.	Other diseases of early infancy with immaturity	67	43	110	1·82	1·24	1·54
774	Immaturity with mention of any other subsidiary condition	2	2	4	0·05	0·06	0·06
776	Immaturity unqualified	279	204	483	7·59	5·86	6·75
E800-E999	Accidents, poisonings and violence	34	17	51	0·93	0·49	0·71
.....	All other causes	84	72	156	2·28	2·07	2·18
	All Causes	1,116	820	1,936	30·34	23·56	27·04

* Based on the Sixth Revision of the International Lists of Diseases and Causes of Death.

SECTION 1.

A. COMMUNICABLE DISEASES, 1950.

NOTIFIABLE INFECTIOUS DISEASES RECORDED IN NEW SOUTH WALES DURING THE YEAR ENDED 31st DECEMBER, 1950.

Public Health Acts, 1902-1937.

The Public Health Act, 1902, provides that the Governor may, by proclamation in the *Government Gazette*, declare that any disease therein named is an infectious disease.

	Notifiable from—	Cases and Deaths Notified.					
		1948.		1949.		1950.*	
		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Typhoid Fever and Paratyphoid	1st January, 1898 ...	17	2	6	...	16	4
Scarlet Fever	” ...	1,358	4	1,514	3	1,052	1
Diphtheria or Membranous Croup.....	” ...	600	51	627	36	390	24
Bubonic Plague	23rd January, 1900...	...	...	...	...	...	...
Infantile Paralysis (including any form of Acute Anterior Poliomyelitis, polioencephalitis or Polio-myeloencephalitis).	1st February, 1912. Definition re-pro-claimed 14th August, 1931.	87	5	182	8	789†	55
Epidemic Cerebro-spinal Fever (Meningococcal Meningitis).	11th October, 1915 ...	82	29	87	30	98	21
Encephalitis Lethargica	1st April, 1926 .....	...	1	6	4	2	...
Cholera	12th August, 1927 ...	...	...	...	...	...	...
Typhus Fever	” ...	12	1	11	1	21	...
Yellow Fever .....	” ...	...	...	...	...	...	...
Puerperal Infection	16th August, 1929 ...	72	22	26	22	14	9
Undulant Fever	13th August, 1937 ...	...	...	4	...	1	...
Leprosy	25th February, 1938	3	...	1	...	1	...
Tuberculosis (all forms)	14th May, 1945	1,711	815	1,641	769	1,787	671
Smallpox	17th September, 1948	...	...	...	...	...	...
	Total	3,942	930	4,105	873	4,171	785
	Population at 31st December	3,062,344		3,175,935		3,278,026	

* VI International Classification. † Classified according to date of receipt of notification.

Public Health Act, 1902.

A total of 4,171 cases of infectious diseases was notified under the Public Health Act, 1902, during 1950 or 66 more cases than in 1949. The number of cases notified from the 147 municipalities, 134 shires and the unincorporated portion of the western division; the deaths due to these infections; the age and sex of the patients; and the seasonal incidence of the various diseases are shown in appended Table I-IX (pp. 13-29). As indicated below, pulmonary tuberculosis is notifiable under the Public Health (Amendment) Act, 1915; and venereal diseases under the Venereal Diseases Act, 1918.

Public Health (Amendment) Act, 1915.

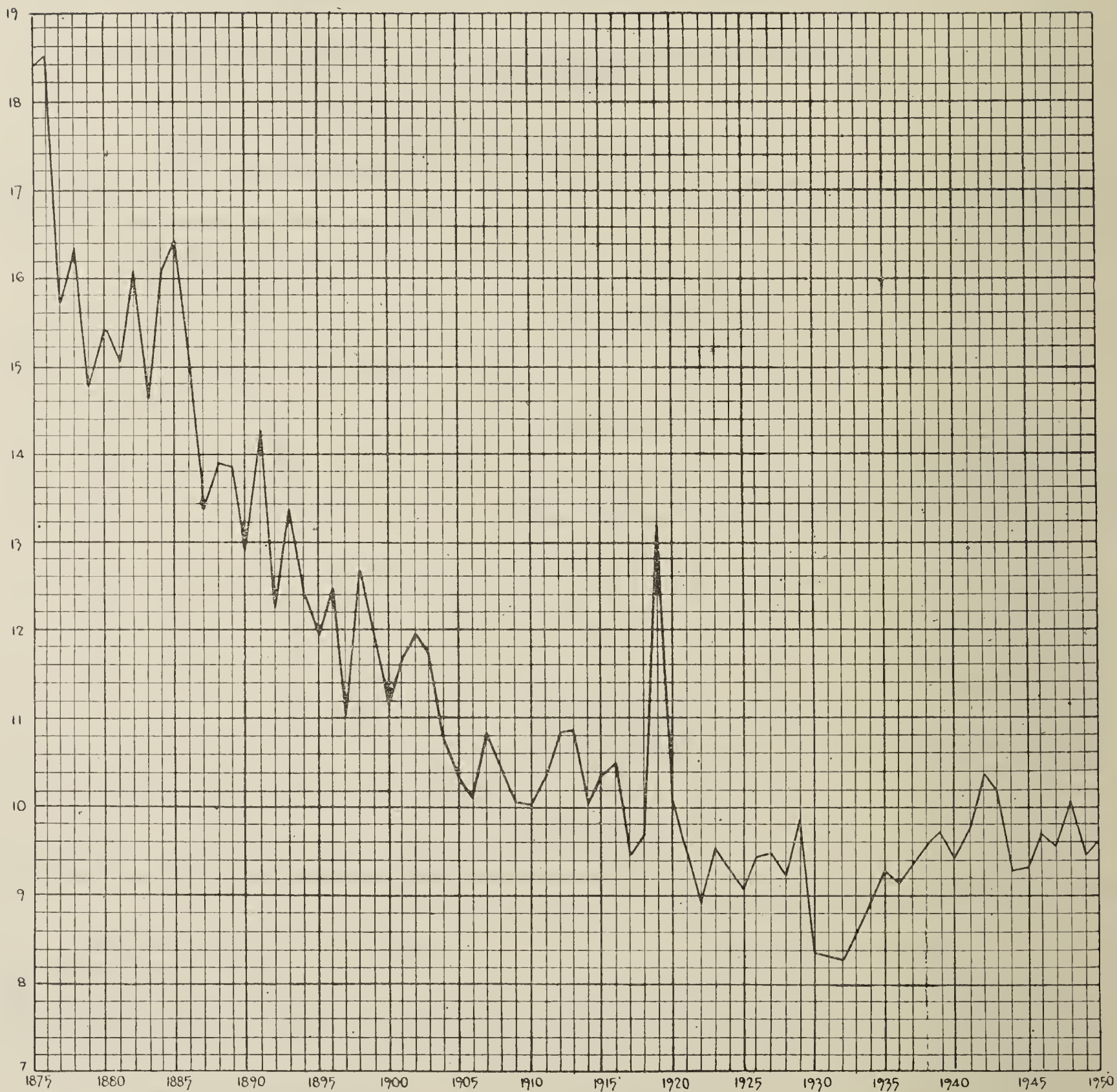
Pulmonary Tuberculosis was made a notifiable disease under an amendment of the Public Health Act in 1915. In 1950 registered cases amounted to 1,787, an increase of 146 on the registrations received in 1949. There were 671 deaths, or an decrease of 98 compared with the deaths recorded in 1949. A survey by the Director of the Tuberculosis Division is on p. 60.

Venereal Diseases Act, 1918.

Cases of venereal diseases notified in 1950 numbered 2,453, a decrease of 590 cases on the number (3,043) received in 1949. The report of the Director of the Division is on p. 31.

GRAPH I.

Annual Death Rate per 1,000 of the Population in New South Wales, 1875-1950.



From 1950 all death rates are compiled according to the VIth International classification.

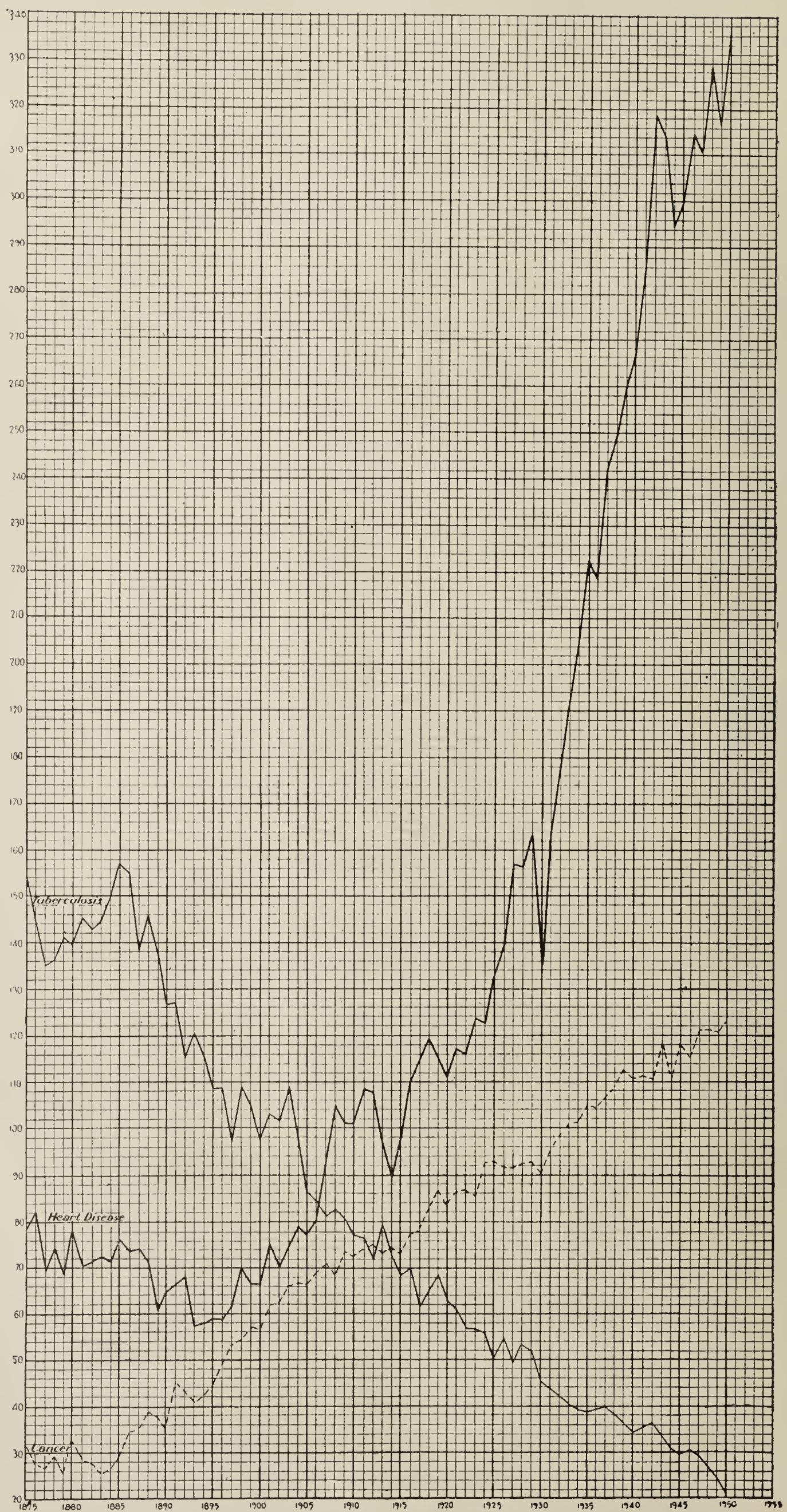
TABLE I.—Notifiable Infectious Diseases—Cases and Deaths, Each Local Arca in the Metropolitan Health District, 1950.

Municipality or Shire.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro- spinal Meningitis.		Encep- halitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuber- culosis (all forms).	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
MUNICIPALITIES.																			
Sydney, City of	211,900	...	...	62	...	38	1	31	4	18	2	...	...	1	...	3	...	245	123
Ashfield	42,910	...	...	7	...	3	...	22	3	2	...	...	...	...	...	...	...	33	7
Auburn	45,590	...	...	3	...	4	...	8	...	...	...	...	...	...	...	...	...	25	11
Bankstown	63,900	...	...	26	...	7	...	13	2	1	...	...	...	...	...	...	...	35	10
Botany	29,920	...	...	6	...	3	...	4	...	...	...	...	...	1	...	...	...	14	4
Burwood	34,510	1	...	9	...	...	...	8	1	2	1	...	...	...	...	...	...	25	9
Canterbury	110,450	...	...	35	...	11	2	26	1	5	1	...	...	...	...	1	...	59	20
Concord	30,990	...	...	8	...	1	...	11	...	2	...	...	...	...	...	...	...	26	8
Drummoyne	33,510	...	...	7	...	4	...	5	...	2	1	...	...	...	...	...	...	14	7
Fairfield	35,240	...	...	12	...	10	...	7	...	...	1	...	...	...	...	...	1	21	12
Holroyd	30,310	...	...	9	...	6	2	10	...	1	...	...	...	1	...	...	...	20	3
Hunter's Hill	12,090	...	...	6	...	...	...	4	...	...	...	...	...	...	...	...	...	8	2
Hurstville	40,960	1	1	15	...	2	...	17	...	...	...	...	...	...	...	...	...	18	6
Kogarah.....	43,520	...	...	16	...	...	...	1	...	1	...	...	...	...	...	...	...	19	6
Ku-ring-gai	45,170	...	...	19	...	1	...	12	...	...	...	...	...	...	...	...	...	130	19
Lane Cove	22,030	...	...	3	...	...	...	13	...	...	...	...	...	...	...	...	...	14	4
Leichhardt.....	69,130	...	...	25	...	3	...	17	1	4	1	...	...	...	...	1	...	65	24
Liverpool	18,360	...	...	9	...	21	1	4	2	...	...	...	...	...	...	1	...	9	3
Manly	35,350	...	...	4	...	1	...	12	1	...	...	...	...	...	...	...	...	15	4
Marrickville	82,480	...	...	23	...	6	...	15	...	1	...	...	...	...	...	1	1	56	22
Mosman	26,810	...	...	3	...	...	...	3	...	...	...	...	...	...	...	...	...	17	6
North Sydney	60,730	...	...	8	...	4	...	6	1	1	...	...	...	...	...	...	...	42	18
Parramatta	66,360	...	...	21	...	11	...	20	1	1	...	...	...	...	...	...	...	48	16
Randwick	104,640	2	...	47	...	7	...	21	...	2	1	...	...	1	...	...	1	91	35
Rockdale	81,020	1	...	18	...	5	...	19	...	1	...	...	...	...	...	...	...	31	10
Ryde	47,400	...	...	23	...	1	1	6	1	4	...	...	...	...	...	...	...	14	3
Strathfield	25,410	...	...	13	...	...	...	7	...	2	...	...	...	...	...	...	...	15	3
Waverley	75,640	...	...	27	...	5	1	16	...	1	...	...	...	1	...	2	...	73	17
Willoughby	55,000	...	...	14	...	...	...	12	1	1	1	...	...	...	...	...	...	29	6
Woollahra	53,140	1	...	11	...	...	...	21	...	2	...	...	...	1	...	...	...	38	11
SHIRES AND PORT JACKSON.																			
Hornsby.....	35,080	...	...	9	...	2	1	5	...	...	...	...	...	...	...	...	...	18	9
Warringah	41,740	...	...	4	...	6	...	9	1	1	...	...	...	...	...	...	1	18	6
Harbour of Port Jackson	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	1,711,290	6	1	502	...	162	9	385	20	55	9	...	...	6	...	9	4	1285	444

* Undulant Fever—Ku-ring-gai Municipality, 1 case, nil deaths.

GRAPH 2.

Cancer, Tuberculosis and Heart Disease—Annual Death Rate per 100,000 of Population in New South Wales 1875-1950.



From 1950 all death rates are compiled according to the VIth International classification.

TABLE II.—Notifiable Infectious Diseases—Cases and Deaths, Each Local Area in the Hunter River Health District, 1950.

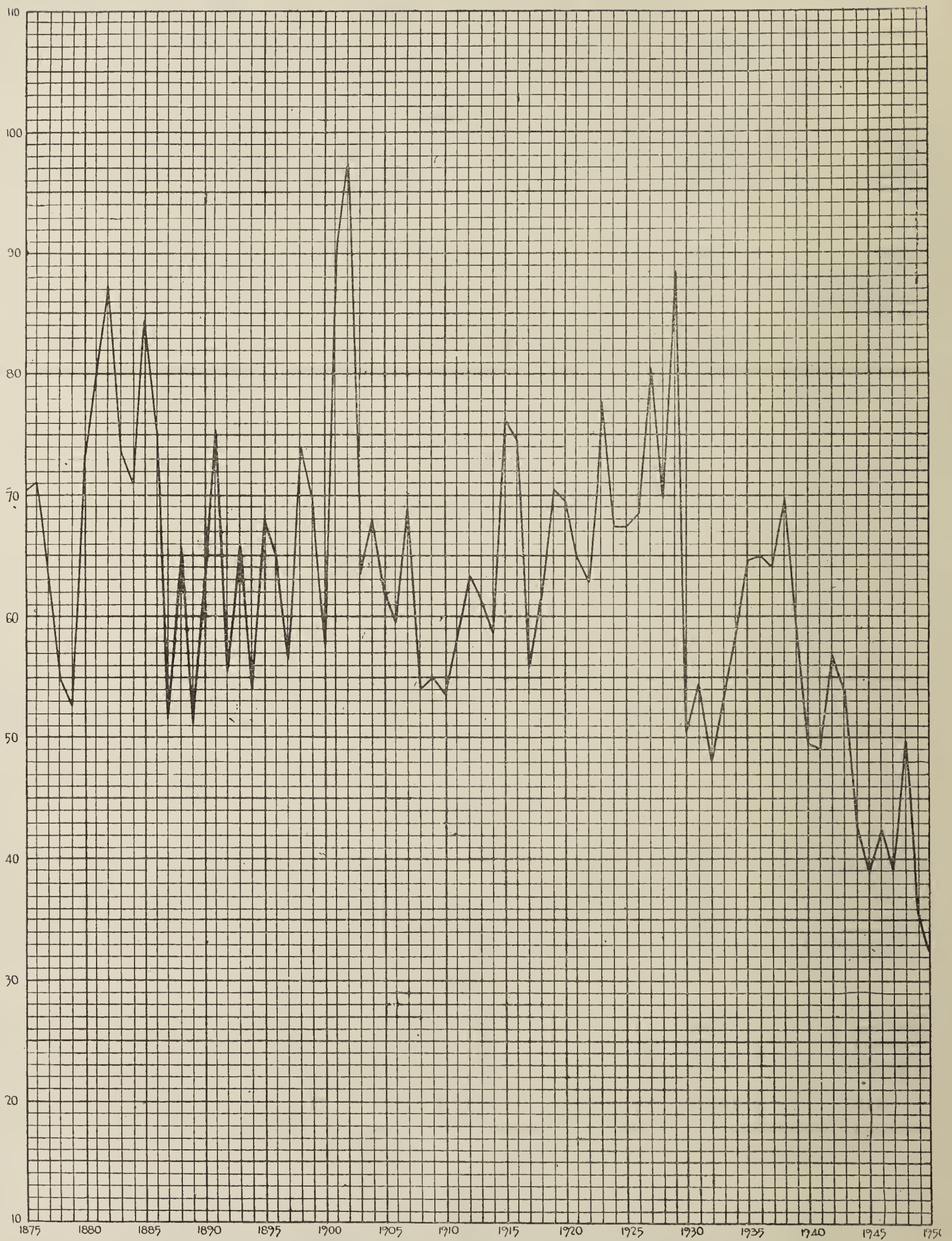
Municipality or Shire.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuberculosis (all forms).	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
MUNICIPALITIES.																			
Newcastle	133,110	4	...	17	...	22	1	42	7	3	1	...	...	...	...	...	...	65	36
Cessnock	13,600	...	...	2	...	...	...	1	1	...	...	...	...	...	...	...	...	9	3
Maitland	20,800	...	...	7	...	...	...	8	...	1	...	...	...	2	...	...	...	4	2
Singleton	4,100	...	...	...	...	...	...	2	...	1	...	...	...	...	...	...	...	5	...
SHIRES AND PORT HUNTER.																			
Kearsley	31,750	...	...	23	...	...	...	6	...	2	...	...	...	...	...	...	...	11	1
Lake Macquarie	48,680	...	...	4	...	19	2	18	4	...	...	...	...	...	...	...	...	24	6
Lower Hunter	6,640	...	...	...	...	...	...	6	1	...	...	...	...	...	...	...	...	3	1
Port Stephens	7,070	...	...	...	...	2	...	1	...	...	...	...	...	...	...	1	...	...	2
Port Hunter .....	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...
Total	265,750	4	...	53	...	44	3	84	13	7	1	...	...	2	...	...	1	122	51

TABLE III.—Notifiable Infectious Diseases—Cases and Deaths, Each Local Area in the South Coast Health District, 1950.

Municipality or Shire.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection .		Tuberculosis (all forms)	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
MUNICIPALITIES.																			
Bowral	3,880	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Camden	4,340	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Campbelltown	8,010	...	...	7	...	7	1	7	...	1	...	...	...	...	...	...	...	...	4
Gerrington	950	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Jamberoo	970	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Kiama	2,430	...	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...
Shellharbour	4,040	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	1	...
Wollongong, Greater ...	72,380	...	...	9	...	6	...	6	...	3	...	...	...	...	...	...	1	41	15
SHIRES.																			
Mittagong	5,670	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Shoalhaven	14,260	...	...	1	...	5	...	2	...	4	...	...	...	...	...	...	...	4	...
Sutherland.....	40,800	...	...	11	...	4	...	19	1	2	...	...	...	...	...	...	1	17	10
Wingecarribee	8,010	...	...	1	...	1	...	1	1	...	...	...	...	...	...	...	...	...	1
Wollondilly	9,180	...	...	6	...	1	...	3	...	...	...	...	...	...	...	...	...	2	4
Total	174,920	...	...	40	...	27	1	38	2	11	1	...	...	...	...	...	2	66	36

GRAPH 3.

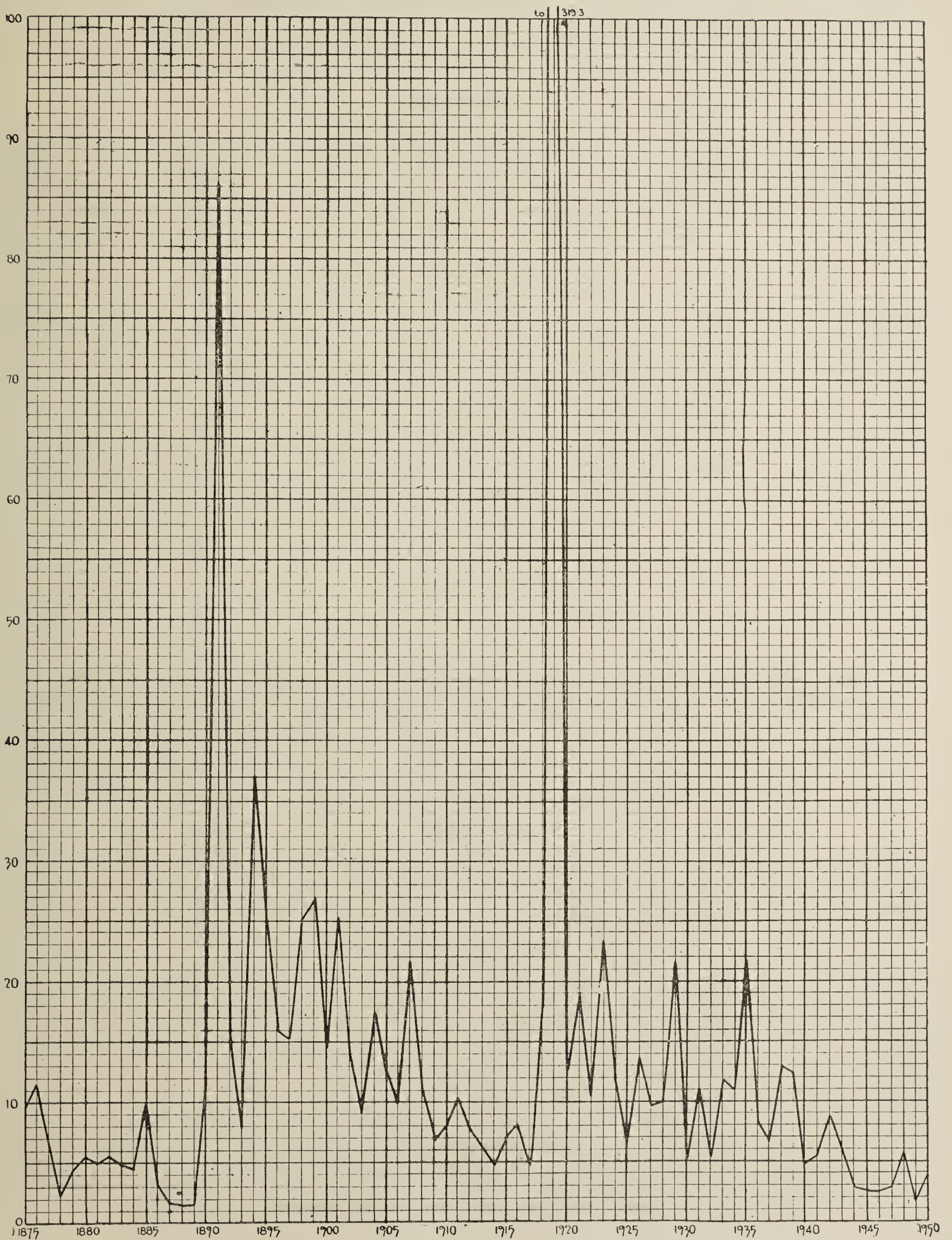
Pneumonia—Annual Death Rate per 100,000 of Population in New South Wales, 1875–1950.



From 1950 all death rates are compiled according to the VIth International classification.

GRAPH 4.

Influenza—Annual Death Rate per 100,000 of Population in New South Wales, 1875–1950.



From 1950 all death rates are compiled according to the VIth International classification.

TABLE IV.—Notifiable Infectious Diseases—Cases and Deaths, Each Local Area in the Richmond-Tweed Health District, 1950.

Municipality or Shire.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuberculosis (all forms).	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
MUNICIPALITIES.																			
Ballina	3,350	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Casino	7,310	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...
Grafton	8,940	...	...	...	...	4	...	...	...	...	...	...	...	1	...	...	...	4	1
Grafton South	4,160	...	...	1	...	4	...	...	...	...	...	...	...	...	...	...	...	2	1
Lismore	16,360	...	...	7	...	9	...	1	...	...	...	...	...	1	...	...	...	5	4
Macleay	1,790	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Mullumbimby	1,730	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Ullmarra	1,670	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
SHIRES.																			
Byron	9,310	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	5	...
Copmanhurst	2,650	...	...	...	...	1	...	...	...	...	...	...	...	1	...	...	...	1	...
Gundurimba	4,030	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Harwood	4,790	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Kyogle	11,970	...	...	3	...	2	1	...	...	1	...	...	...	1	...	...	...	1	2
Terania	7,290	...	...	...	...	2	...	1	...	...	...	...	...	6	...	...	...	1	...
Tintenbar	4,890	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...
Tomki	3,710	...	...	...	...	1	...	...	...	...	...	...	...	1	...	1	...	...	...
Tweed	20,630	...	...	2	...	7	...	4	...	...	...	...	...	...	...	...	...	2	1
Woodburn	4,450	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	2	1
Total	119,030	...	...	15	...	38	1	6	...	2	...	...	...	11	...	1	...	23	11

TABLE V.—Notifiable Infectious Diseases—Cases and Deaths, Each Local Area in the Mitchell Health District, 1950.

Municipality or Shire.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuberculosis (all forms).	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
MUNICIPALITIES.																			
Bathurst	12,510	1	...	74	...	2	...	12	2	1	...	...	...	...	...	...	...	7	4
Blue Mountains	22,440	...	...	5	...	1	...	6	1	1	1	...	...	...	...	...	...	13	15
Lithgow	15,390	...	...	10	...	...	...	...	...	...	...	...	...	...	...	1	...	4	1
Mudgee	4,340	...	...	3	...	2	...	2	...	...	...	...	...	...	...	...	...	6	2
Orange	16,690	...	...	4	...	...	...	2	...	...	...	...	...	...	...	...	...	9	2
SHIRES.																			
Abererombie	4,020	...	...	17	...	...	...	4	...	1	...	...	...	...	...	...	...	2	2
Amaroo	2,340	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Blaxland	9,720	...	...	3	...	...	...	1	...	...	...	...	...	...	...	...	...	4	2
Canobolas	5,760	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	3
Cudgegong	4,390	...	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Gulgong*	5,760	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Lyndhurst	6,340	...	...	2	...	...	...	1	...	...	...	1	...	...	...	...	...	...	...
Molong	1,750	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...
Oberon	3,410	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Rylstone	4,550	...	...	2	...	...	...	1	...	...	...	...	...	...	...	...	...	2	1
Turon	7,850	...	...	2	...	...	...	2	...	...	...	...	...	...	...	...	...	1	...
Total	127,260	1	1	124	...	5	...	36	3	3	1	2	...	...	...	1	...	51	34

* From 1st January, 1950, A Riding of Cobbora Shire was amalgamated with Gulgong Shire.

TABLE VI.—Notifiable Infectious Diseases—Cases and Deaths, Each Local Area in the Remainder of State, 1950.

Municipality.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuberculosis (all forms).	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.		
MUNICIPALITIES.*																			
Albury	15,580	...	...	25	...	1	...	...	...	...	...	...	...	...	1	...	11	1
Armidale	8,100	...	...	22	...	...	...	...	...	...	...	...	...	...	...	...	3	...
Balranald	1,290	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...
Barraba	1,530	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Bega	3,260	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	...
Bombala	1,200	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bourke	2,110	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	1
Brewarrina	860	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...
Broken Hill	31,020	...	...	7	...	...	...	2	1	...	...	...	...	...	...	...	...	13
Cobar	2,090	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2
Condobolin	2,700	...	...	1	...	...	...	1	1	...	...	...	...	...	...	...	1	...
Cooma	2,630	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	1
Coonamble.....	2,730	...	...	2	...	6	2	4	...	...	...	...	...	...	...	...	2	...
Cootamundra	5,690	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Corowa	2,970	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Cowra	5,740	...	...	...	...	11	...	1	...	...	...	...	...	...	...	...	2	4
Deniliquin	4,000	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Dubbo	10,310	...	...	...	...	3	...	8	...	...	...	...	...	...	...	...	4	...
Dungog	2,150	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2
Forbes	6,280	...	...	5	...	...	...	...	...	...	...	...	...	...	...	...	3	2
Glen Innes	5,640	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Goulburn	17,230	1	...	3	...	2	...	5	...	1	...	...	...	...	1	1	8	2
Grenfell	2,530	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Gunnedah	4,560	...	...	4	...	...	...	...	...	1	...	...	...	...	...	...	1	1
Hay	3,080	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Inverell	6,820	...	...	1	...	...	...	1	...	...	...	...	...	...	...	...	1	1
Junee	4,230	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...
Kempsey	6,900	...	...	...	...	...	...	3	...	...	1	...	...	...	...	...	6	3
Manilla	1,880	...	...	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...
Moama	700	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Moree	5,410	...	...	...	...	1	...	2	...	...	...	...	...	...	...	...	8	2
Murrumburrah	2,700	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
Muswellbrook	4,260	...	...	1	...	...	...	6	...	...	...	...	...	...	...	...	...	...
Narrabri.....	3,560	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	1
Narrandera	4,500	...	...	4	...	1	...	1	...	...	...	...	...	...	...	...	1	...
Narromine	1,910	...	...	...	...	1	...	4	...	...	...	...	...	...	...	...	1	2
Nyngan	1,930	...	...	5	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Parkes	7,450	...	...	15	...	...	...	3	...	...	...	...	...	...	...	...	7	...
Peak Hill	1,190	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Penrith	14,750	1	...	4	...	1	...	7	...	1	...	...	...	...	...	...	3	1
Port Macquarie.....	3,240	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Queanbeyan	5,380	...	...	...	...	1	...	6	...	...	...	...	...	...	...	...	2	...
Quirindi	2,760	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Seone	2,480	...	...	...	...	1	...	1	...	...	1	...	...	...	...	...	2	1
Tamworth	12,960	...	...	11	...	6	...	...	...	...	...	...	...	...	...	...	6	2
Taree	6,930	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Temora	4,410	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	3	...
Tenterfield	3,180	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wagga Wagga	16,670	...	...	17	...	2	...	25	...	...	...	...	...	...	...	...	6	3
Waleha	1,580	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Warren	1,830	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Wentworth	2,730	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1
Wileannia	820	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
Windsor	8,890	...	...	1	...	3	...	...	...	1	...	...	...	...	...	...	3	4
Wingham	2,250	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...
Yass	3,450	...	...	...	...	...	...	5	...	...	...	...	...	...	...	...	1	...
Young	4,840	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total Municipalities*	297,870	2	...	138	...	44	2	90	3	4	2	2	1	114	54

* Including Broken Hill.

Table VI.—Notifiable Infectious Diseases—Cases and Deaths, Each Local Area in the Remainder of State, 1950—*continued*.

Shire.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro- spinal Meningitis.		Encep- halitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuber- culosis (all forms).	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.		
SHIRES— <i>continued.</i>																			
Narraburra	3,270	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	1
Nundle	1,410	...	...	...	...	1	1	...	1	...	...	...	...	...	...	...	...	1	...
Nymboida	2,340	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Orara	1,570	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Patrick Plains	5,510	...	...	2	...	...	...	1	...	1	...	...	...	...	...	...	...	1	...
Peel	6,440	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...
Severn	4,980	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Snowy River	3,630	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Stroud	6,870	...	...	5	...	1	...	12	2	...	...	...	...	...	...	...	...	...	...
Talbragar	3,370	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...
Tallaganda	2,950	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Tamarang	2,460	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Tenterfield	4,570	...	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Timbregongie	3,330	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	2
Tumbarumba	3,430	...	...	4	...	2	...	1	...	...	...	...	...	...	...	...	...	...	1
Tumut	9,200	...	...	...	...	1	...	4	...	...	...	...	...	...	...	...	...	5	1
Upper Hunter	5,010	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...
Uralla	4,680	...	...	5	...	...	...	1	...	1	1	...	...	...	...	...	...	...	...
Urana	2,490	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wade	12,040	...	...	6	...	3	...	5	2	...	...	...	...	...	...	...	...	2	3
Wakool	3,500	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	1
Walgett	3,470	...	...	...	...	...	1	1	...	2	...	...	...	...	...	...	...	1	...
Wallarobba	4,330	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	1	1
Waradgery	600	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Waugoola	7,120	...	...	...	...	...	1	3	1	...	...	...	...	...	...	1	...	2	...
Weddin	3,110	...	...	...	...	2	...	3	...	...	...	...	...	...	...	...	...	...	...
Wellington*	10,700	...	...	2	...	5	...	9	1	...	...	...	...	...	...	...	...	4	2
Windouran	480	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wingadee	3,040	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Wyang	12,010	...	...	2	...	...	...	4	...	...	...	...	...	...	...	...	...	3	1
Yallaroi	3,830	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Yanko	3,450	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...
Yarrowlunla	3,170	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Total, Shires	506,460	3	2	177	1	69	8	145	13	16	7	...	...	2	...	1	1	106	40

WESTERN DIVISION (UNINCORPORATED) POLICE DISTRICTS.
(*Note*.—Only those Police Districts for which cases are recorded are shown.)

Euabalong .....	†	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1
Goodooga .....	†	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Walgett .....	†	...	...	...	...	1	...	3	...	...	...	...	...	...	...	...	...	...	...
Total, Unincorporated	14,720	...	...	3	...	1	...	4	1	...	...	...	...	...	...	...	...	...	1

MISCELLANEOUS.

Lord Howe Island	202	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Migratory	7,390	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Outside the State— Australian Capital Territory .....	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...
Queensland .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Victoria .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
South Australia .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total, Miscellaneous	7,592	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	2	...
Total, New South Wales	3,224,892	16	4	1,052	1	390	24	789	55	98	21	2	...	21	...	14	9	1787	671

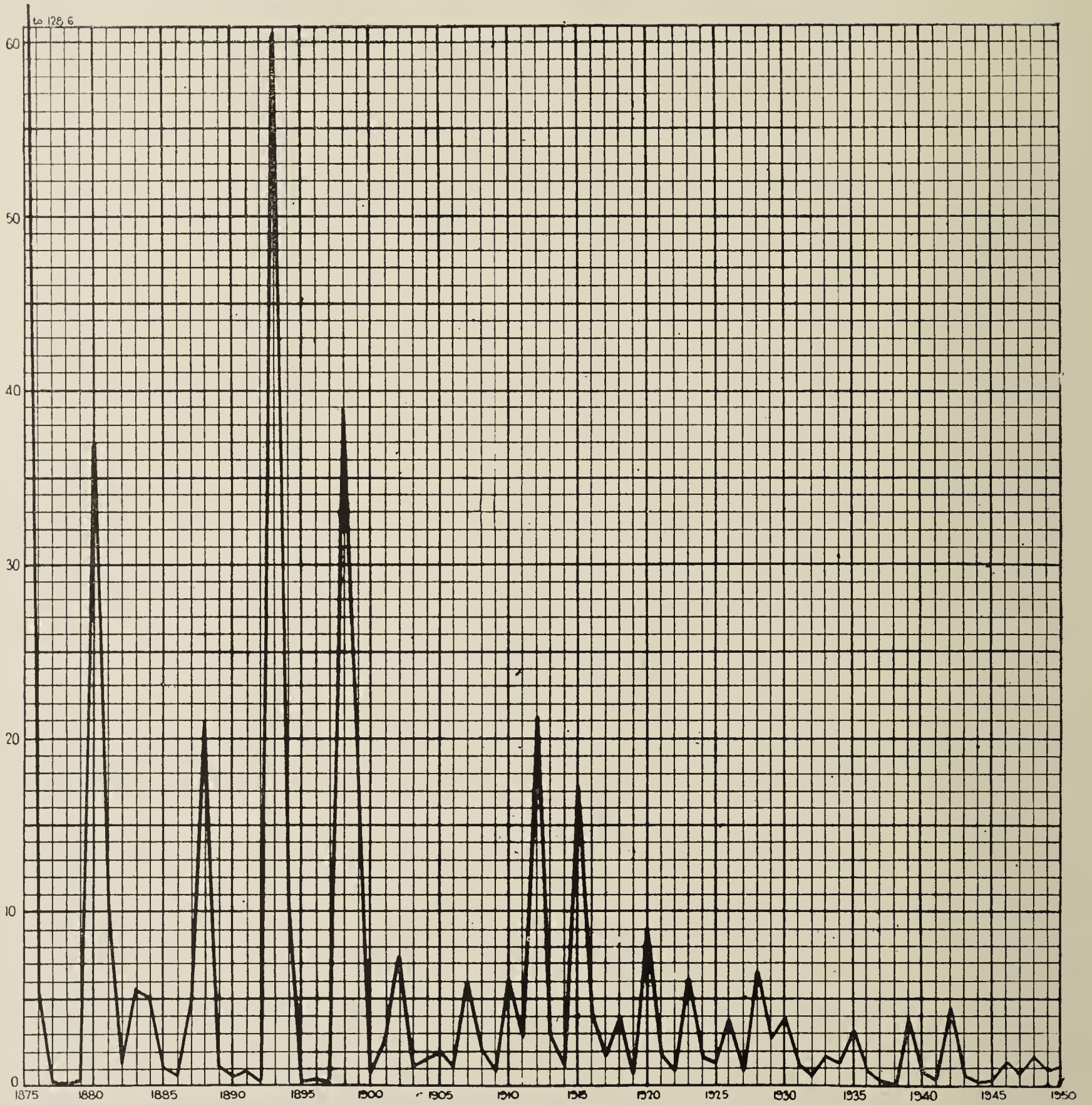
Total, New South Wales—Undulant Fever—1 case; Deaths, Nil.

* From 1st January, 1950, the former Wellington Municipality, Macquarie Shire and B and C Riding, of Cobbora Shire were amalgamated to form Wellington Shire.

† Not available.

GRAPH 5.

Measles—Annual Death Rate per 100,000 of Population in New South Wales, 1875–1950.



From 1950 all death rates are compiled according to the VIth International classification,

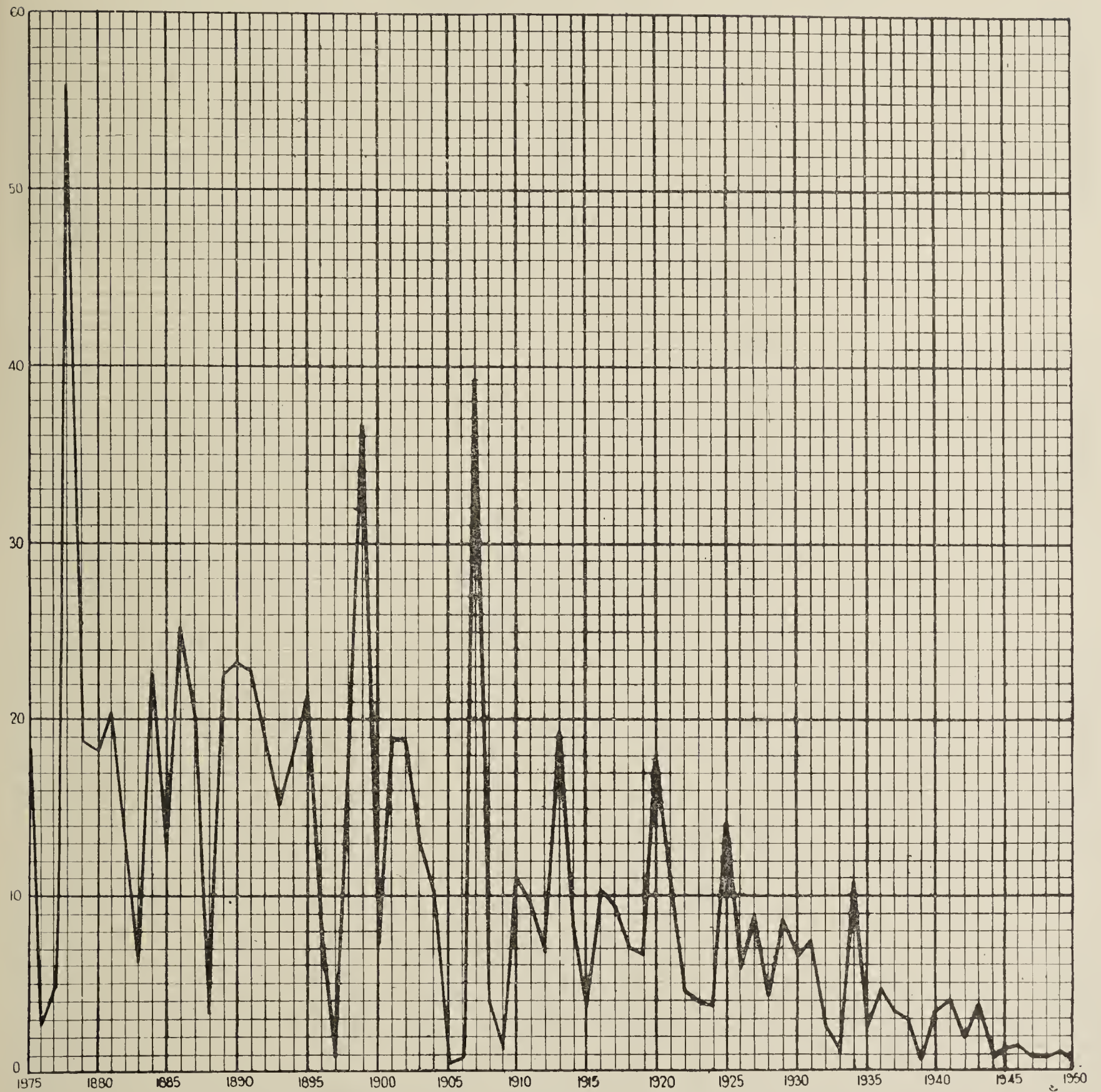
TABLE VII.—Notifiable Infectious Diseases—Cases and Deaths by Sex and Age, Each Health District, 1950—continued.

Age Group.	Typhoid and Paratyphoid Fever.			Scarlet Fever.			Diphtheria.			Infantile Paralysis.			Cerebrospinal Meningitis.			Encephalitis Lethargica.			Typhus Fever.			Puerperal Infection.			Tuberculosis (all forms).										
	Cases.		Deaths.	Cases.		Deaths.	Cases.		Deaths.	Cases.		Deaths.	Cases.		Deaths.	Cases.		Deaths.	Cases.		Deaths.	Cases.		Deaths.	Cases.		Deaths.								
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.								
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.								
MITCHELL HEALTH DISTRICT.																																			
All ages	1	1	1	1	1	1	2	3	5	1	2	24	12	36	3	3	1	2	3	1	1	1	2	32	19	51	26	8	34						
Under 1 year							2	38				5	2	7									1	1	1	1	1	1							
1-4 years							22	38				12	5	17	1		1	1					2	2	2	2	2	2							
5-14 "							43	75	1	1		5	2	7	2		1						9	4	7	16	7	9							
15-24 "	1		1				2	3	1	1		1	3	4				1	1				7	3	10	4	2	7							
25-34 "							1	3	1	1		1	3	1									3	1	7	7	1	7							
35-44 "							2	2															4	3	7	6	2	8							
45-54 "																							4	4	3	7	6	2							
55-64 "																							4	4	3	7	6	2							
65 years and over							1	1	1														4	4	3	7	6	2							
Not stated																																			
BROKEN HILL DISTRICT.																																			
All ages							3	4	7			1	1	2	1								13	5	18	12	1	13							
Under 1 year												1																							
1-4 years							2	2				1	1	1																					
5-14 "								2																											
15-24 "																																			
25-34 "							1																												
35-44 "																																			
45-54 "																																			
55-64 "																																			
65 years and over																																			
Not stated																																			
REMAINDER OF STATE.																																			
All ages	4	1	5	1	1	1	2	137	174	311	1	1	47	67	114	7	3	10	146	92	238	10	6	16	9	11	20	2	146	76	222	52	30	82	
Under 1 year							1	4						3	6	1			1	7	36	2	4	2	1	3	5	3							
1-4 years								114	155				21	20	41	6	1	1	32	20	56	2	5	2	2	3	4	2	2	1	3	3	3		
5-14 "	3		3	1				73	82	155			13	34	47		1	1	59	25	84	1	4	3	3	3	2	7	17	24	3	1	3		
15-24 "								8	16				5	3	8		1	1	32	28	60	3	2	1	2	2	1	31	57	5	5	8			
25-34 "								10	10				1	1	2				10	13	23	2	1	2			1	16	43	7	12	13			
35-44 "	1	1	2					2	4	5			2	3	5				4	6	6						2	2	2	5	7	12			
45-54 "													1	2	3				4	1	5						20	4	22	9	3	12			
55-64 "															1				1	1	1						38	4	42	14	4	18			
65 years and over								1	3										1	1	1						23	5	28	17	3	20			
Not stated																											2								
WHOLE STATE.																																			
All ages	10	6	16	2	2	2	4	464	588	1052	1	1	170	220	390	13	11	24	470	319	789	36	19	55	54	44	98	14	9	1130	657	1,787	484	187	671
Under 1 year							1	4	7																										
1-4 years	2	1	3				1	171	213	384			68	72	140	2	4	12	122	84	206	2	6	7	10	12	22	1	2	6	18	8	2	10	
5-14 "	5	1	6	2	1	3		244	310	554			72	101	173	3	5	8	208	124	332	9	15	11	25	17	42	5	4	10	5	3	3	8	
15-24 "	2	1	3					25	21	46			6	14	20		1	1	89	75	164	15	10	25	3	5	16	1	11	275	7	11	18		
25-34 "								8	16	24			1	10	11		1	1	27	26	53	4	4	4	1	3	4	5	199	208	29	47	76		
35-44 "	1	1	2					3	13	16			7	7	14				8	4	12	1	1	2	3	6	3	2	193	222	315	68	42	110	
45-54 "													1	4	5				6	2	8	1	1	2	3	5	6	2	231	289	407	121	23	144	
55-64 "																																			
65 years and over																																			
Not stated																																			
Undulant Fever—1 male aged 38 years (case); deaths, Nil.																																			

Undulant Fever—1 male aged 38 years (case); deaths, Nil.

GRAPH 6.

Whooping Cough—Annual Death Rate per 100,000 of the Population in New South Wales, 1875–1950.



From 1950 all death rates are compiled according to the VIth International classification.

TABLE VIII.—Notifiable Infectious Diseases—Cases and Deaths by Month in Each Health District, 1950.

Month.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuberculosis (all forms).	
	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
METROPOLITAN HEALTH DISTRICT.																		
January	33	...	5	...	43	1	1	1	...	...	1	...	2	...	...	49
February	1	1	37	...	14	2	31	2	3	1	...	...	...	...	3	1	...	32
March	32	...	11	...	24	...	2	...	...	...	1	...	1	...	...	36
April	1	...	58	...	24	...	32	1	3	...	...	...	1	...	...	...	...	26
May	40	...	18	...	33	1	5	3	...	...	...	...	3	1	...	38
June	3	...	48	...	8	1	15	1	4	1	...	...	2	...	...	...	...	37
July	42	...	11	...	14	1	10	1	...	...	...	...	...	...	...	59
August	47	...	9	...	23	3	14	1	...	...	...	...	...	...	...	47
September	40	...	14	...	38	1	6	...	...	...	...	...	...	2	...	37
October	34	...	18	2	23	3	1	1	...	...	...	...	...	...	...	34
November	1	...	55	...	17	2	41	4	2	...	...	...	1	...	...	...	...	27
December	36	...	13	2	68	2	4	...	...	...	...	...	...	...	...	22
Total	6	1	502	...	162	9	385	20	55	9	...	...	6	...	9	4	1,285	444
Undulant Fever—1 case, August; deaths, nil.																		
HUNTER RIVER HEALTH DISTRICT.																		
January	3	...	6	...	...	...	3	...	...	...	...	...	...	...	...	3
February	8	...	3	1	...	...	...	...	...	...	1	...	...	...	...	7
March	1	...	7	...	2	...	...	1	...	...	1	...	...	...	...	6
April	2	...	...	...	...	...	...	...	...	...	...	1
May	2	...	2	...	1	...	...	...	...	...	...	...	...	...	...	4
June	4	...	8	...	2	...	1	...	...	...	...	...	...	...	...	2
July	3	...	4	...	...	...	...	...	...	...	...	...	...	1	...	2
August	14	...	5	...	1	...	1	...	...	...	...	...	...	...	...	5
September	1	...	3	...	1	1	...	...	1	...	...	...	...	...	...	...	...	5
October	1	...	10	...	4	1	6	...	...	...	...	...	...	...	...	...	...	7
November	2	...	4	...	2	...	37	3	1	...	...	...	...	...	...	...	...	4
December	1	...	2	...	33	10	...	...	...	...	...	...	...	...	...	5
Total	4	...	53	...	44	3	84	13	7	1	...	...	2	...	...	1	122	51
SOUTH COAST HEALTH DISTRICT.																		
January	3	...	2	...	4	...	...	...	...	...	...	...	...	1	...	4
February	4	...	1	...	7	...	1	...	...	...	...	...	...	...	...	4
March	4	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...
April	5	...	2	...	4	...	...	...	...	...	...	...	...	...	...	2
May	1	...	6	...	3	1	1	...	...	...	...	...	...	...	...	5
June	3	...	4	...	...	...	1	...	...	...	...	...	...	1	...	4
July	3	...	3	1	2	...	1	...	...	...	...	...	...	...	...	2
August	4	...	3	...	4	...	1	...	...	...	...	...	...	...	...	5
September	5	...	3	...	5	...	1	1	...	...	...	...	...	...	...	4
October	2	...	1	...	3	...	2	...	...	...	...	...	...	...	...	3
November	3	...	1	...	2	1	3	...	...	...	...	...	...	...	...	...
December	3	...	...	...	3	...	...	...	...	...	...	...	...	...	...	3
Total	40	...	27	1	38	2	11	1	...	...	...	...	...	2	66	36
RICHMOND-TWEED HEALTH DISTRICT.																		
January	1	...	...	...	...	...	...	...	...	...	...	...	...	1
February	1	...	1	...	...	...	...	...	1	...	...	...	...	...
March	3	...	5	...	...	...	1	...	...	...	1	...	1	...	...	1
April	2	...	6	...	...	...	...	...	...	...	...	...	...	...	...	1
May	1	...	3	1	...	...	...	...	...	...	...	...	...	...	...	3
June	1	...	7	...	...	...	...	...	...	...	3	...	...	...	...	2
July	3	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
August	1
September	6	...	2	...	...	...	...	...	1	...	...	...	...	1
October	1	...	5	...	...	...	1	...	...	...	2	...	...	...	...	...
November	3	...	...	...	...	...	...	...	...	...	...	...	...	...
December	4	...	1	...	3	...	...	...	...	...	2	...	...	...	...	...
Total	15	...	38	1	6	...	2	...	...	...	11	...	1	...	23	11

TABLE VIII.—Notifiable Infectious Diseases—Cases and Deaths by Month in Each Health District, 1950—*continued*.

Month.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuberculosis (all forms).	
	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
MITCHELL HEALTH DISTRICT.																		
January	1	...	1	...	2	...	2	...	...	...	...	...	...	...	...	...	...	3
February .....	...	...	4	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...
March .....	...	...	4	...	...	...	2	...	1	...	...	...	...	...	...	...	...	3
April .....	...	...	4	...	...	...	...	1	...	...	1	...	...	...	1	...	...	3
May .....	...	...	7	...	1	...	4	...	...	...	...	...	...	...	...	...	...	2
June .....	...	...	3	...	1	...	4	...	...	...	...	...	...	...	...	...	...	4
July .....	...	...	2	...	1	...	3	...	...	...	...	...	...	...	...	...	...	5
August .....	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7
September .....	...	1	2	...	...	...	...	...	2	1	...	...	...	...	...	...	...	2
October .....	...	...	1	...	...	...	6	1	...	...	...	...	...	...	...	...	...	3
November .....	...	...	40	...	...	...	7	...	...	...	1	...	...	...	...	...	...	1
December .....	...	...	53	...	...	...	6	1	...	...	...	...	...	...	...	...	...	1
Total	1	1	124	...	5	...	36	3	3	1	2	...	...	...	1	...	51	34
BROKEN HILL DISTRICT.																		
January .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
February .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
March .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
April .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
May .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
June .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
July .....	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	3
August .....	...	...	2	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
September .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
October .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
November .....	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
December .....	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4
Total .....	...	...	7	...	...	...	2	1	...	...	...	...	...	...	...	...	18	13
REMAINDER OF STATE.																		
January	2	1	25	...	11	1	21	2	2	...	...	...	...	...	...	...	...	9
February	1	...	11	...	2	...	14	1	1	1	...	...	...	...	...	...	...	10
March .....	...	...	43	...	15	1	25	2	3	1	...	...	...	...	...	...	...	9
April .....	...	...	45	...	9	2	10	2	1	...	...	...	...	...	1	...	...	5
May .....	...	...	46	...	12	...	17	1	2	2	...	...	1	...	...	2	...	4
June .....	...	...	27	...	24	1	12	1	1	...	...	...	...	...	...	...	...	6
July .....	...	...	24	...	14	3	8	1	2	...	...	...	...	...	...	...	...	10
August .....	...	...	17	1	6	...	9	1	...	2	...	...	1	...	...	...	...	4
September	1	...	9	...	9	1	13	...	3	...	...	...	...	...	...	...	...	8
October .....	...	...	18	...	5	...	25	1	4	2	...	...	...	...	...	...	...	7
November .....	...	1	34	...	4	1	37	3	...	...	...	...	...	...	...	...	...	6
December	1	...	12	...	3	...	47	1	1	1	...	...	...	...	2	...	...	4
Total	5	2	311	1	114	10	238	16	20	9	...	...	2	...	3	2	222	82
WHOLE STATE.																		
January	3	1	65	...	27	1	70	3	6	1	...	...	1	...	2	1	...	69
February	2	1	64	...	21	3	55	3	5	2	...	...	2	...	3	1	...	54
March .....	...	...	87	...	39	1	54	2	7	2	...	...	3	...	2	...	...	56
April	1	...	114	...	41	2	48	4	4	...	1	...	1	...	2	...	...	39
May .....	...	...	97	...	42	1	58	3	8	5	...	...	1	...	3	3	...	57
June	3	...	86	...	52	2	33	2	7	1	...	...	5	...	...	1	...	55
July .....	...	...	77	...	33	4	29	2	13	1	...	...	1	...	...	1	...	82
August .....	...	...	87	1	23	...	37	5	16	3	...	...	1	...	...	...	...	70
September	2	1	59	...	33	2	58	1	13	2	...	...	1	...	...	2	...	58
October	1	...	66	...	33	3	63	5	8	3	...	...	2	...	...	...	...	54
November	3	1	137	...	27	3	124	11	6	...	1	...	1	...	...	...	...	38
December	1	...	113	...	19	2	160	14	5	1	...	...	2	...	2	...	...	39
Total	16	4	1,052	1	390	24	789	55	98	21	2	...	21	...	14	9	1,787	671

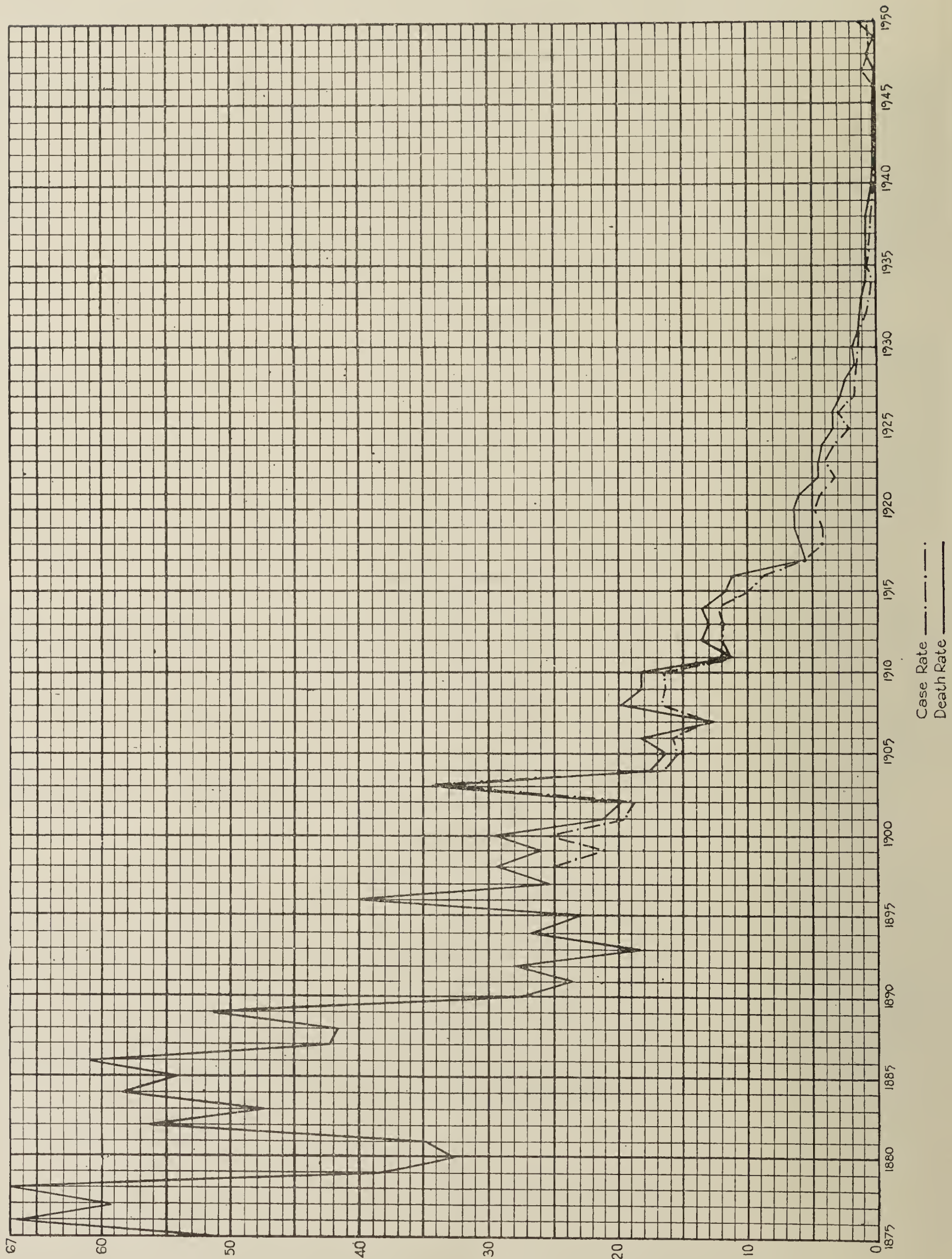
Undulant Fever—1 case August; deaths, nil.

GRAPH 7.

Typhoid Fever—

Annual Death Rate per 100,000 of Population in New South Wales, 1875–1950.

Annual Case Rate per 10,000 of Population in New South Wales, 1898–1950.



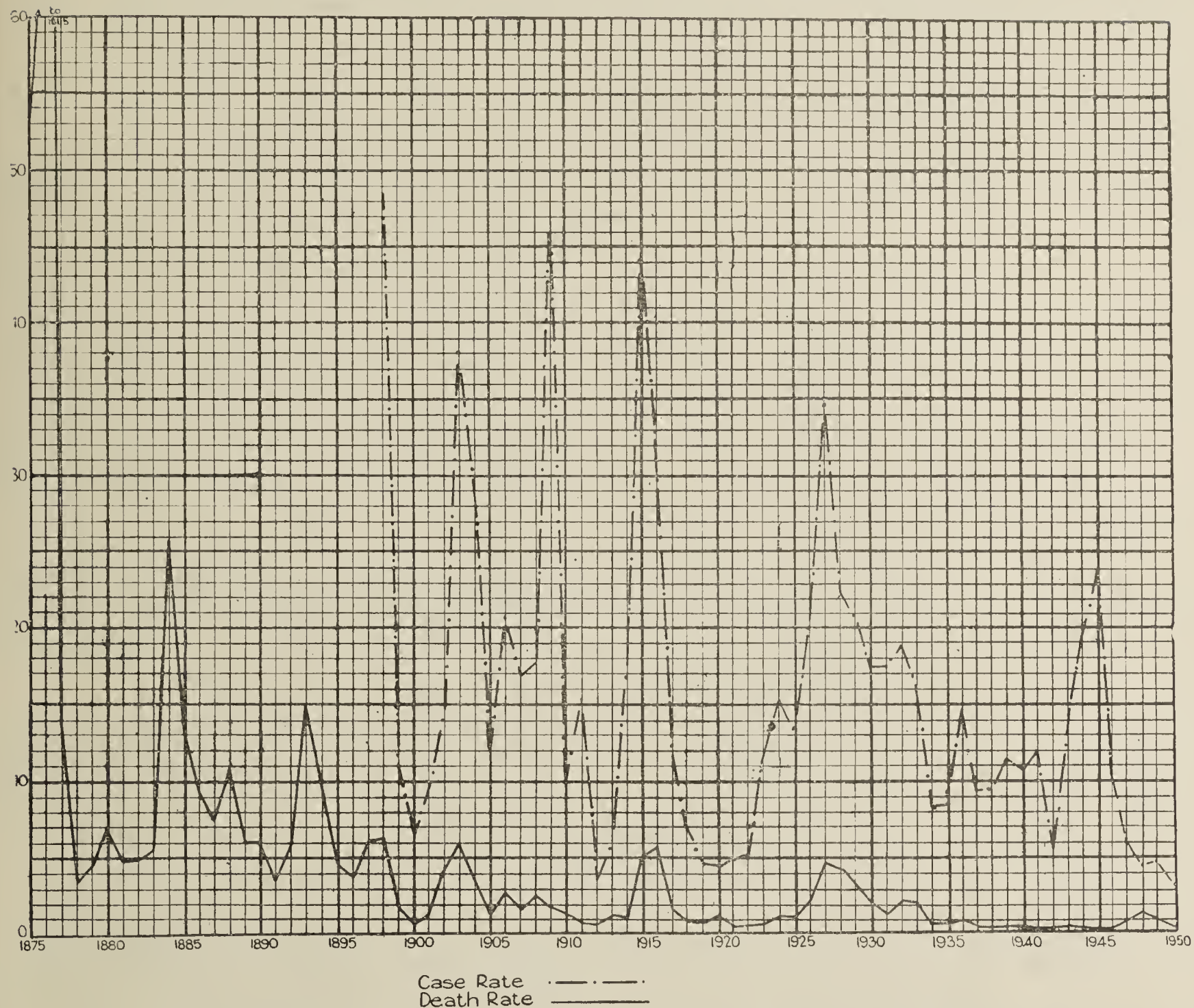
From 1950 all death rates are compiled according to the VIth International classification.

GRAPH 8.

Scarlet Fever—

Annual Death Rate per 100,000 of Population in New South Wales, 1875–1950.

Annual Case Rate per 10,000 of Population in New South Wales, 1898–1950.



From 1950 all death rates are compiled according to the VIth International classification.

TABLE IX.—Summary, 1950.

District.	Estimated Mean Population.	Typhoid and Paratyphoid Fever.		Scarlet Fever.		Diphtheria.		Infantile Paralysis.		Cerebro-spinal Meningitis.		Encephalitis Lethargica.		Typhus Fever.		Puerperal Infection.		Tuberculosis (all forms)	
		C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.	D.
Metropolitan Health District	1,711,290	6	1	502	...	162	9	385	20	55	9	...	...	6	...	9	4	1,285	444
Hunter River Health District	265,750	4	...	53	...	44	3	84	13	7	1	...	...	2	...	...	1	122	51
South Coast Health District	174,920	...	...	40	...	27	1	38	2	11	1	...	...	...	...	...	2	66	36
Richmond-Tweed Health District	119,030	...	...	15	...	38	1	6	...	2	...	...	...	11	...	1	...	23	11
Mitchell Health District	127,260	1	1	124	...	5	...	36	3	3	1	2	...	...	...	1	...	51	34
Broken Hill District ...	31,020	...	...	7	...	...	...	2	1	...	...	...	...	...	...	...	...	18	13
Remainder of State—																			
Municipalities	266,850	2	...	131	...	44	2	88	2	4	2	...	...	...	...	2	1	114	41
Shires	506,460	3	2	177	1	69	8	145	13	16	7	...	...	2	...	1	1	106	40
Unincorporated	14,720	...	...	3	...	1	...	4	1	...	...	...	...	...	...	...	...	...	1
Lord Howe Island ...	202	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Migratory	7,390	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Residence outside the State Australian Capital Territory	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	2	...
Total, New South Wales	3,224,892	16	4	1,052	1	390	24	789	55	98	21	2	...	21	...	14	9	1,787	671

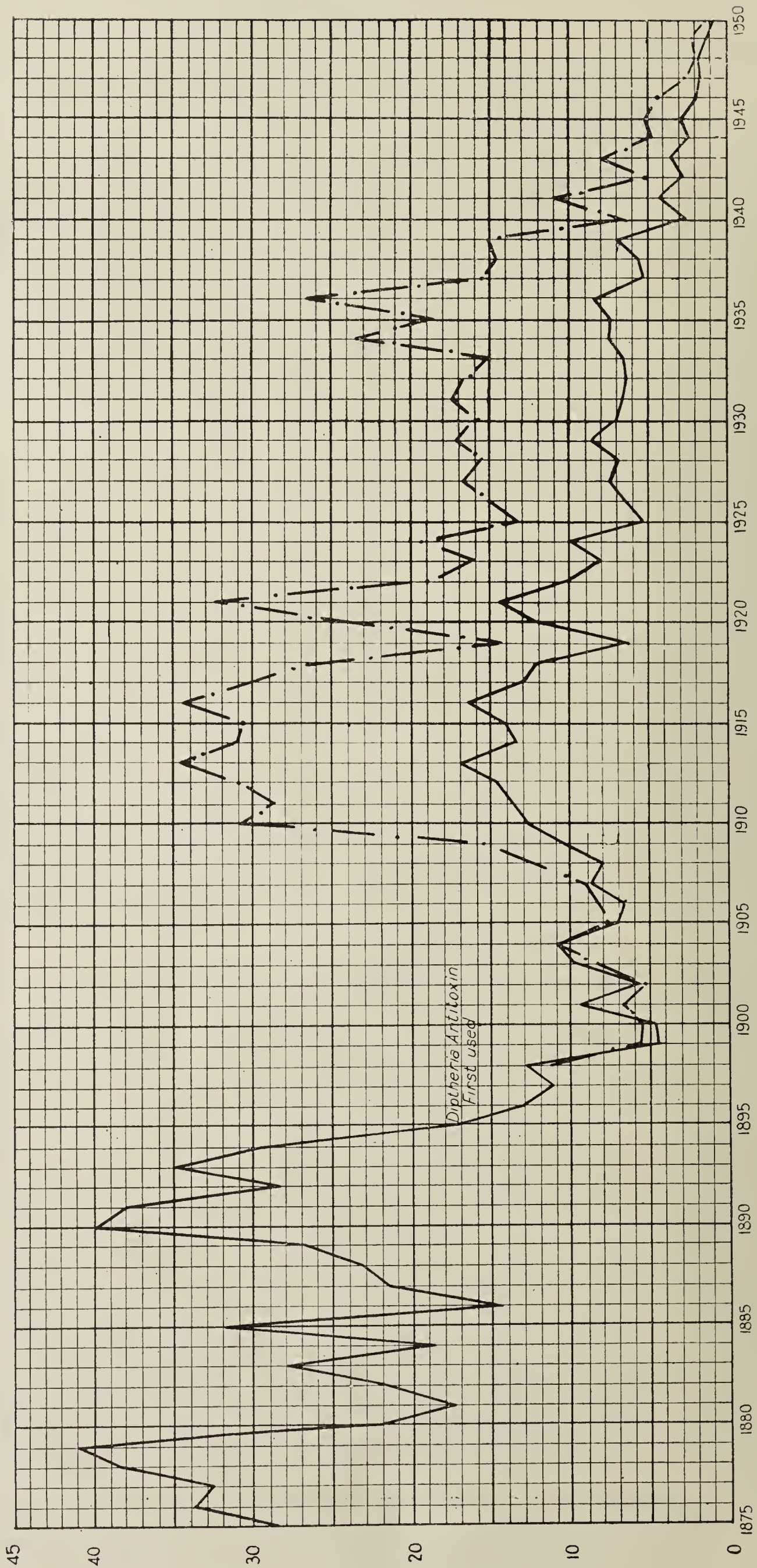
Undulant Fever—Metropolitan Health District : 1 case, deaths, nil.

GRAPH 9.

Diphtheria—

Annual Death Rate per 100,000 of Population in New South Wales, 1875-1950.

Annual Case Rate per 100,000 of Population in New South Wales, 1898-1950.



From 1950 all death rates are compiled according to the VIth International classification.

DIVISION OF SOCIAL HYGIENE.

Staff.

Director.—J. COOPER BOOTH, M.B., Ch.B. (Edin.)
Deputy Director.—J. H. ABBOTT, M.B., Ch.M. (Syd.)
Medical Officers.—F. A. BRIERLEY, M.B. (Syd.); J. P. BARRY, M.B., B.S. (Syd.)
Clerical.—L. MAHER, four assistants and typiste.
Senior Clinic Assistant R. C. Lewry, with Clinic Assistant and seven attendants.

The notifications of venereal diseases have continued to decrease in number and the total for this year (2,453) is 590 less than the previous year—a fall of 19.4 per cent.

The decline in the yearly totals has continued since 1945 and the total for 1950 is 54.6 per cent. below that for 1946 and is the lowest recorded since the Venereal Diseases Act, 1918, came into force in December, 1920.

While the decrease has been chiefly in notifications of gonorrhoea, there has been also this year a noticeable decline in syphilis, which has fallen to the lowest total so far of 627 for this year. Three hundred and forty-two of the notifications for syphilis (54.5 per cent.) were new infections.

Among the many things which may have contributed to this continuing decline, the wide use of penicillin has played a major part. The rapidity of control of infection in gonorrhoea has undoubtedly lessened the spread of infection, as has also the treatment and cure of females before the disease becomes deep seated.

Prophylaxis.

The prophylactic facilities at the Divisional Clinic continue to be used by a large number of males and 17,423 treatments were given during the year. Eighty-nine per cent. of such treatments were given during the night, early morning hours and at week-ends.

Divisional Clinic.

There has been a decline in the number of persons seeking examination and treatment for the first time—3,441 for the year 1950, as compared with 3,694 in 1949. Of these new patients 26.2 per cent. were found to be suffering from a venereal disease, as compared with 25.9 per cent. in 1949.

The total attendances made by all persons was 40,659, which was 5,608 less than the previous year.

Publicity.

The year has been very quiet so far as press publicity is concerned. Posters have been displayed throughout the State.

The *Medical Journal of Australia*, published (on 21st October, 1950) an article by the Deputy-Director of the Division, entitled "Treatment of Syphilis with Penicillin at the Government Venereal Diseases Clinic, Sydney". In the contribution, which was a preliminary report, an account was given of some of the results achieved to date in the Divisional Clinic.

The Director of the Division gave eleven lectures during the year.

VENEREAL DISEASES ACT, 1918.

Report on notifications received during the year ended 31st December, 1950.

Two thousand four hundred and fifty-three notifications of venereal disease were received during the year 1950, a decrease of 590 as compared with the previous year.

Notifications from private practitioners amounted to 19 per cent. of the total, as compared with 12.6 per cent. in 1949 and 20.1 per cent. in 1948. The majority of the notifications (91.8 per cent.) came from the metropolitan area.

Syphilis.

There were 627 notifications of syphilis (427 males and 200 females), a figure 406 below that for the previous year. The sex ratio was 2.1 males to 1 female.

Of the cases notified 13.5 per cent. were being treated privately, as compared with 9 per cent. in 1949 and 15.5 per cent. in 1948.

Syphilis contributed 21.1 per cent. of the total notifications, as compared with 33.9 per cent. in 1949 and 26.4 per cent. in 1948.

Of the syphilitic infections notified 342 cases (54.5 per cent.) were classified as early infections, as compared with 507 (49.2 per cent.) in 1949 and 618 (55.8 per cent.) in 1948.

The notifications of syphilis gave an incidence of 19.3 per 100,000 of mean population, as compared with 33.2 in 1949 and 36.5 in 1948.

Gonorrhoea.

Of the total notifications received during the year 1,657 were for gonorrhoea (1,483 males and 174 females) which was a decrease of 179 on the number received during the previous year. The sex ratio was 8.5 males to 1 female.

The notifications received from private practitioners amounted to 18 per cent. of the total gonorrhoea, as compared with 13.9 per cent. in 1949 and 19.2 per cent. in 1948. The percentage of gonorrhoea in the total notifications of venereal disease received during 1950 was 67.5 per cent., as compared with 60.3 per cent. in 1949 and 60.8 per cent. in 1948.

The notifications of gonorrhoea gave an incidence of 51.1 per 100,000 of mean population, as compared with 58.9 in 1949 and 95.1 in 1948.

Other Forms of Venereal Disease.

Soft Chancre (Chancroid).—One case (male) was reported.

Gonococcal Ophthalmia.—There were no notifications.

Venereal Warts.—Ninety-six cases were notified (ninety-one males and five females).

Gleet.—There were seventy-two notifications.

Venereal Granuloma.—There were no notifications.

Failure to Continue Treatment.

During 1950 the names and addresses of 821 defaulters (730 males and 91 females) were notified. This figure was 137 below that for the previous year.

Because of inaccurate information given by patients or because of failure to notify change of address, 253 letters were returned unclaimed.

The following table shows the percentage of defaulters who remained permanent defaulters:—

Year.	Total Defaulters Notified.	Resumed Treatment, Died or Left State.	Remained in Default.	Percentage Remaining in Default.
1948	1,057	653	404	38.2
1949	958	604	354	36.9
1950	821	545	276	33.6

Prosecutions.

Action was taken against 400 persons for breach of section 5 of the Act (failure to continue under treatment).

Clinics.

Attendances at clinics for males totalled 47,992 (84.7 per cent. of this total being attendances at the clinic in the Division of Social Hygiene) as compared with 59,585 in 1949 and 72,459 in 1948.

At the clinics for females the attendances were 8,924 (62.6 per cent. of this total attendance being at the Special Clinic at the Rachel Forster Hospital for Women and Children), as compared with 11,040 in 1949 and 11,775 in 1948.

The sex ratio of attendances was 5.4 males to 1 female as compared with 5.4 males to 1 female in 1949 and 6.1 males to 1 female in 1948.

Metropolitan District.—Ten clinics are available. Of these one is for males only and one for females only.

The clinic at the Division of Social Hygiene is continuous from 9 a.m. to 5.30 p.m., Monday to Friday.

Prophylactic facilities are continuously available at the Divisional Clinic every day, and 17,423 prophylactic treatments were given during 1950.

Newcastle District.—The clinic at the Royal Newcastle Hospital provided 74.1 per cent. of the notifications of venereal disease from the Newcastle District. Prophylactic facilities are available at the hospital.

District General Hospitals.—Treatment is available at country General Hospitals.

Bed Accommodation.—Beds are available in the metropolitan area for males and females as required.

Pathological Examinations.

During 1950 the Pathological Laboratories carried out 48,811 serologic tests for venereal disease.

Smears examined for the presence, or otherwise, of gonococci totalled 4,135.

Five hundred and three examinations were made for treponema pallidum (472 in the Division of Social Hygiene) as compared with 736 for the previous year.

The following Tables are appended:—

Table I.—Notifications received during 1950, arranged in order of district from which notification came.

Table II.—Return of cases of venereal disease notified during 1950, showing forms of disease and age and sex of patient.

Table III.—Summary of total attendances at various public clinics during 1950.

TABLE I.—Notifications received during 1948 to 1950, arranged in order of districts.

	Metropolitan Area.			Newcastle District.			Remainder of State.		
	1948.	1949.	1950.	1948.	1949.	1950.	1948.	1949.	1950.
Gonorrhoea	2,642	1,618	1,517	161	147	84	81	71	56
Syphilis	1,021	930	565	42	51	32	44	52	30
Soft Chancre	9	...	1	...	...	...	...	...	...
Gleet	114	94	72	...	...	...	...	...	...
Venereal Warts ...	85	78	96	...	...	...	...	1	...
Gon. Ophthalmia ...	...	...	...	...	...	...	...	...	...
Venereal Granuloma	...	...	...	...	...	...	...	1	...
Total	3,871	2,720	2,251	203	198	116	125	125	86

TABLE II.—Return of Cases of Venereal Diseases notified during 1950 showing Forms of Disease and Age and Sex of Patient.

	0-5.		6-10.		11-15.		16-20.		21-25.		26-30.		31-35.		36-40.		41-45.		46-50.		Over 50.		Age not Stated.		Totals.		Grand Total.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Gonorrhoea .....	...	1	...	2	1	3	170	29	436	55	306	34	187	23	152	14	69	7	50	1	39	4	73	1	1,483	174	1,657
Syphilis	3	6	...	1	...	1	29	22	76	46	80	32	42	20	48	21	29	9	35	11	67	27	18	4	427	200	627
Soft Chancre .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	1
Gleet .....	...	...	...	...	...	...	...	...	1	...	34	...	7	...	9	...	8	...	5	...	8	...	...	...	72	...	72
Venereal Warts .....	...	...	...	...	...	...	10	2	35	1	15	1	11	1	8	...	4	...	4	...	4	...	...	...	91	5	96
Gon. Ophthalmia ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Venereal Granuloma	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	3	7	...	3	1	4	209	53	548	102	435	67	247	44	217	35	110	16	94	12	119	31	91	5	2,074	379	2,453

TABLE III.—Table showing Annual Attendance Returns at Public Clinics for Treatment of Venereal Diseases, 1948, 1949 and 1950, inclusive.

Year.	Attendances.			New Cases.					
				Gonorrhoea.			Syphilis.		
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
HEALTH DEPARTMENT CLINIC.									
1948	56,593	...	56,593	1,131	...	1,131	319	...	319
1949	46,267	...	46,267	819	...	819	358	...	358
1950	40,659	...	40,659	864	...	864	223	...	223
ROYAL PRINCE ALFRED HOSPITAL.									
1948	6,471	1,573	8,044	261	37	298	120	50	170
1949	3,854	717	4,571	116	5	121	168	32	200
1950	2,094	429	2,523	41	9	50	68	18	86
SYDNEY HOSPITAL.									
1948	5,597	1,353	6,950	351	9	360	64	29	93
1949	4,459	1,302	5,761	202	6	208	36	38	74
1950	2,430	1,265	3,695	115	...	115	47	22	69
ROYAL ALEXANDRA HOSPITAL FOR CHILDREN.									
1948	84	402	486	1	6	7	2	4	6
1949	50	272	322	1	4	5	2	3	5
1950	42	142	184	...	1	1	3	2	5
ROYAL SOUTH SYDNEY HOSPITAL.									
1948	191	51	242	2	1	3	4	1	5
1949	141	45	186	5	...	5	2	1	3
1950	110	113	223	2	1	3	3	4	7
ROYAL NORTH SHORE HOSPITAL.									
1948	727	724	1,451	23	2	25	12	8	20
1949	346	616	962	15	...	15	4	9	13
1950	192	554	746	4	...	4	4	6	10
NEWCASTLE DISTRICT HOSPITAL.									
1948	2,252	1,360	3,612	98	13	111	22	12	34
1949	4,236	1,415	5,651	91	12	103	31	13	44
1950	2,422	816	3,238	50	8	58	22	6	28
RACHEL FORSTER HOSPITAL FOR WOMEN.									
1948	...	6,278	6,278	...	112	112	...	94	94
1949	...	6,663	6,663	...	80	80	...	95	95
1950	...	5,591	5,591	...	62	62	...	83	83
PARRAMATTA DISTRICT HOSPITAL.									
1948	244	34	278	7	...	7	4	3	7
1949	232	10	242	1	...	1	2	...	2
1950	43	19	62	1	1	2	1	1	2

CONSULTATIVE COUNCIL FOR THE PHYSICALLY HANDICAPPED (ACUTE ANTERIOR POLIOMYELITIS).

Meetings.

Thirteen meetings of the Council were held during the year and twelve of the Executive Committee.

Personnel.

Following the resignation of Dr. E. H. M. Stephen as Chairman in July, 1950, Dr. S. W. G. Rateliff was appointed Chairman by the Minister for Health as from August, 1950.

Mrs. Lee Martin was appointed in June, 1950, as a co-opted member representing the Occupational Therapists.

Miss N. Firth resigned from position as Almoner in July, 1950, and Mrs. I. May was temporarily appointed in November, 1950.

NOTIFICATIONS (compiled according to date of onset).

The increased incidence of poliomyelitis in New South Wales commencing in November, 1949, continued throughout 1950, rising rapidly in November and December of that year.

Seven hundred and ninety-one cases were notified during the year, the months of onset being as follows:—

1949—November	2
„ —December	19
1950—January	76
„ February	48
„ March	53
„ April	53
„ May	55
„ June	24
„ July	27
„ August	55
„ September	50
„ October	75
„ November	124
„ December	92
„ Queried	38
	791

Table I.—465 cases were males (58.78 per cent.); 326 cases were females (41.22 per cent.).

Age.—540 cases (68.27 per cent.) were under the age of 15 years. The youngest reported was aged 11 days at the onset (the mother of this child became severely paralysed immediately after the confinement). The two oldest cases were aged 71 and 72 years.

TABLE II.

Ages.	Males.	Females.	Total.	Per Cent.
Under 1 year	8	3	11	1.5
1-4 years	126	80	206	26.1
5-9	132	75	207	26.1
10-14	74	53	127	16.0
15-19	57	43	100	12.6
20-24	30	35	65	8.2
25-29	13	24	37	4.8
30-34	12	2	14	1.7
35-39	5	3	8	1.0
40 years and over	8	8	16	2.0
Total	465	326	791	100.0

Distribution.

Three hundred and seventy-nine cases were from the metropolitan area; 412 from the following rural districts:—

Hunter River Health District	85
South Coast Health District	36
Mitchell Health District	35
Richmond-Tweed	5

Shires.

Kyeamba	15
Stroud	12
Gundagai	9
Gosford	6
Wellington	6
Lockhart	6
Eurobodalla	5
Waugoola	5
Blacktown	4
Wyong	4
Wade	4

Shires—continued.

Mitchell	4
Tumut	4
Walgett	4
Goobang	3
Timbrelongie	3
Mumbulla	3
Crookwell	2
Namburra	2
Weddin	2
McIntyre	2
Carrathool	2
Culcairn	2
Barraba	2
Namoi	2
Wallerobba	2
Boomi	2
Wollondilly	2
Illabo	1
Mandawa	1
Lachlan	1
Canobolas	1
Nambucca	1
Coreen	1
Burrangong	1
Patrick Plains	1
Tumbarumba	1
Uralla	1
Finley	1
Coolamon	1
Apsley	1
Bland	1
Mitchell	1
Turon	1
Holbrook	1
Goodradigbee	1
Manning	1
Bingara	2
Bogan	1
Talbragar	1
Oberon	1
Colo	1
Boree	1
Dorrigo	1
Macleay	1

Municipalities.

Wagga Wagga	25
Dubbo	8
Muswellbrook	6
Penrith	6
Queanbeyan	6
Gundagai	5
Yass	5
Goulburn	5
Narromine	4
Coonamble	4
Wellington	3
Kempsey	3
Parkes	3
Broken Hill	2
Moree	2
Tumbarumba	1
Cowra	1
Bega	1
Seone	1
Tamworth	1
Wentworth	1
Manilla	1
Cootamundra	1
Condobolin	1
Inverell	1
Narrabri	1

Hospital Accommodation.

Four hundred and thirty-seven cases were admitted to metropolitan hospitals:—

Prince Henry Hospital	226
Royal Alexandra Hospital for Children	193
Royal Prince Alfred Hospital	10
North Shore Hospital	2
Ryde District Hospital	1
Sydney Hospital	1
Auburn District Hospital	1
Renwick Hospital	1
Canterbury Hospital	1
St. Vincent's Hospital	1
	437

Three hundred and twenty-six cases were admitted to the following country hospitals:—

Wagga Wagga Base Hospital	82
Waratah	66
Dubbo	22
Bathurst	21
Maitland	15
Royal Newcastle	11
Goulburn	10
Orange	9
Tamworth	7
Brentwood	6
Wollongong	6
Canberra	6
Macleay	4
Inverell	4
Temora	5
Bega	4
Griffith	3
Albury	3
Dangar Cottage	3
Coonamble	3
Narrabri	3
Wellington	3
Moree	3
Lismore	2
Broken Hill	2
Young	2
Manning	2
Wyalong	1
Katoomba	1
Cowra Immigration	1
Parramatta	1
Cootamundra	1
Wentworth	1
Bindawalla	1
Nambucca	1
Armidale	1
Scott Memorial	1
Brisbane	1
Tweed	1
Lithgow	1
Brewarrina	1
Walgett	1
Parkes	1
Coffs Harbor	1
Wangaratta	1
Toowoomba	1

Twenty-eight cases were nursed at home.

Cancellations.

An additional forty-one notifications were later cancelled owing to amended diagnosis as follows:—

Ascending paralysis of Landry	2
Encephalitis	3
Pyrexia of unknown origin	1
Pneumonia	1
Fibrositis	3
Tracheitis	1
Lymphosarcoma	1
Infective Polyneuritis	1
Cerebral Thrombosis	1
Influenza	2
Guillain Barre Sundrome	2
Rheumatic Fever	2
Slipped Epiphysis of Femur	1
Acute Osteo-myelitis	2
Spinal Tumour	1
Concussion	1
Local Condition L. Leg	1
Coryza	1
Functional paresis and neuritis	1
Not stated	13
	—
	41
	—

Table III.—Deaths: Fifty-one cases were fatal. Thirty-six males (7.7 per cent. of the total males), fifteen females (4.6 per cent. of the total females).

Table IV.—Deaths according to age at onset:

1950.	Under 1 yr.	1-4.	5-9.	10-14.	15-19.	20-29.	30-40.	Over 40 yrs.
Total cases notified	11	206	207	127	100	102	22	16
Died	2	5	11	4	15	11	2	1
Percentage	18.2	2.4	5.3	3.1	15	10.8	9.1	6.2

In forty-one fatal cases in whom the duration of illness has been checked the period varied from one day (one case) to six months (one case).

Twenty-nine cases were fatal within seven days.

Thirty-six cases were fatal within fourteen days.

Types of Illness and Severity.

Information in this regard is still being correlated and will be combined in a later report.

After-care.

As the epidemic increased the council received more applications for arrangements regarding after-care and financial assistance for patients being discharged from hospital.

Payment was made for domiciliary physiotherapy in eight cases, transport to an out-patient department in one case, and appliances in two cases.

Physiotherapy fees were also paid for thirty-three poliomyelitis patients staying at the Far West Children's Home, Manly.

By arrangement with the Far West Children's Health Scheme, an orthopaedic surgeon visiting under the auspices of their organisation saw poliomyelitis patients for the council at Albury, Narrandera, Griffith, Temora, Cootamundra and Goulburn.

Consultant surgeons continued to visit country centres to advise on the after-care of poliomyelitis. Visits were paid to Dubbo, Bathurst, and Wagga Wagga.

Financial Statement.

Expenditure charged from 1st January, 1950, to 31st December, 1950, excluding salaries:—

	£	s.	d.
Transport Expenses	27	10	0
Muscle Re-education	319	18	6
Equipment	45	6	8
General Expenses	21	0	0
	£413	15	2

Vocational Training.

Eight persons were assisted under the Vocational Training Grant.

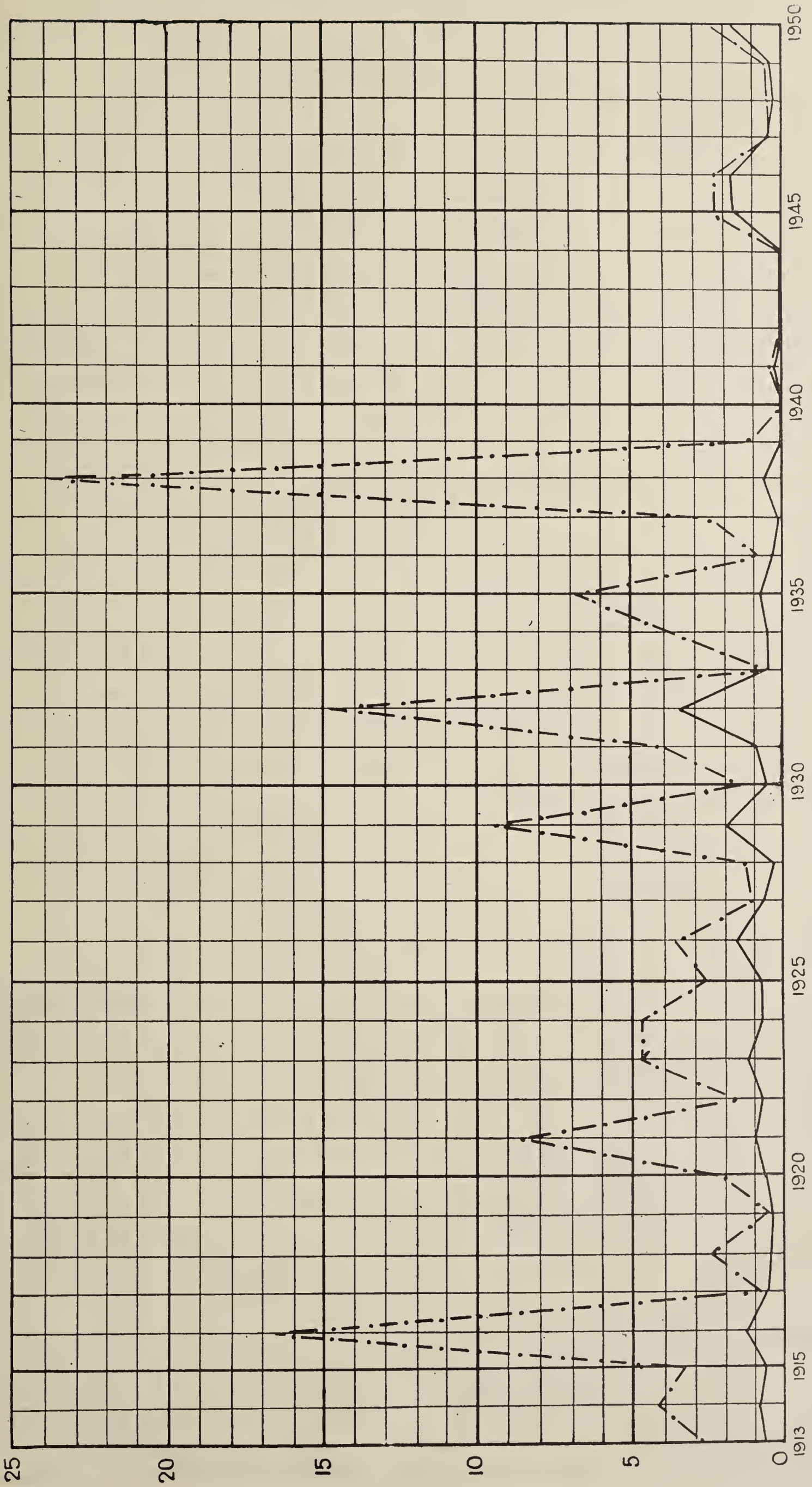
Three received Occupational Therapy.

- (i) (R.E.) aet 7 years (post encephalitis).
- (ii) (L.J.) aet 14 years (epilepsy ataxia).
- (iii) (G.C.) aet 15 years (cerebral hemorrhage).
- One (W.W.) aet 21 years (poliomyelitis and osteomyelitis) continued his course at the Hawkesbury Agricultural College passing his second-year examinations.
- One (P.M.) aet 24 years. (Talipes) completed a course in chiropody.
- One (C.M.) aet 23 years. (Poliomyelitis) commenced a course in surgical bootmaking.
- One (G.P.) aet 21 years. (Poliomyelitis) studied for and passed his Leaving Certificate examination.
- One (S.H.) aet 16 years. (Poliomyelitis) studied typewriting while an in-patient at Yaralla, Concord.

The expenditure on vocational training amounted to £259 7s. 2d.

GRAPH 10.

Infantile Paralysis—Annual Death Rate and Case Rate per 100,000 of the Population in New South Wales, 1913–1950.



Case Rate

Death Rate ———

From 1950 all death rates are compiled according to the VIth International classification.

B. PUBLIC HEALTH ADMINISTRATION.

REPORT OF THE GOVERNMENT ANALYST FOR THE YEAR ENDED 31st DECEMBER, 1950.

Staff.

Government Analyst.—HAROLD B. TAYLOR, M.C., V.D., D.Sc., F.R.I.C., F.R.A.C.I.

Deputy Government Analyst.—ARTHUR D. DIBLEY, A.S.T.C., A.R.A.C.I.

Senior Assistant Government Analyst.—ROBERT G. O'BRIEN, A.S.T.C., F.R.A.C.I.

Analysts.—ERNEST S. OGG, B.Sc. (Hon.), A.R.A.C.I.; WILLIAM F. FISHER, A.S.T.C., A.R.A.C.I.; THOMAS A. McDONALD, A.S.T.C., A.R.A.C.I.; ANTHONY DADOUR, B.Sc.; LISTER G. CLARK, A.S.T.C., A.R.A.C.I.; JOHN S. PLOWMAN, A.S.T.C., A.R.A.C.I.; JOHN W. G. NEUHAUS, A.S.T.C., A.R.A.C.I.; GORDON E. WHITEMAN, B.Sc.; COLIN ANDERSON, B.Sc.; VIVIAN C. MAHONEY, B.Sc.

Laboratory Assistants.—VICTOR WILLIAMS; JOHN A. HORAN, H.D.D.; NORMAN H. PIPER.

Laboratory Assistants-in-Training.—BARRY NEILL; HARRY MIDDLETON; JOHN G. BRIDGES.

Laboratory Attendant.—IVAN RATCLIFFE.

Shorthandwriter and Typist.—MARIE KEMP.

Office Assistants.—VERA SPIERS; MARGARET RYAN.

The number of samples examined in the Chemical Laboratory during the year 1950 amounted to 27,333, comprising 24,495 samples submitted in connection with the administration of the Pure Food Act, and 2,838 samples examined for the public services of the State and miscellaneous authorities.

Numerically, milk was the principal subject of investigation under the Pure Food Act. A total of 17,024 samples were examined, including 5,869 samples collected in the metropolitan area by food, municipal and shire inspectors, 2,812 samples collected by the same authorities in country districts, and 8,343 samples submitted by the Milk Board.

Of the total number of milks collected in the metropolitan area, 1.9 per cent. contravened the standard, while 8.27 per cent. of those collected in the country, and 2.7 per cent. of the samples submitted by the Milk Board failed to conform.

The following table gives particulars of the districts of collection and the kind and proportion of adulterations found:

District of Collection	Metropolitan Area.		Country Districts.		Submitted by Milk Board.		Total.	
Number of milk samples collected	5,869		2,812		8,343		17,024	
Number and proportion of adulterated samples—	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.
Deficient in milk-fat	65	1.108	153	5.44	127	1.51	345	2.02
Contained added water	41	0.69	76	2.702	94	1.12	211	1.23
Deficient in milk-fat and contained added water	6	0.102	3	0.106	6	0.07	15	0.08
Contained dirt .....	...	...	1	0.03	...	...	1	0.05
Total adulterations	112	1.900	233	8.278	227	2.70	572	3.38

The samples other than milk submitted in connection with the administration of the Pure Food Act amounted to 7,471, of which 819 were found to be adulterated or falsely described.

The following table gives particulars of the whole of the food and drug adulterations recorded:

Nature of Sample.	Number of Adulterated Samples.	Particulars of Adulteration.	Nature of Sample.	Number of Adulterated Samples.	Particulars of Adulteration.
Apple juice	2	Unsuitable for human consumption.	Brought forward	196	
Banana butter	1	Contained foreign fat and starch.	Fish	7	Artificially coloured.
Beer	6	Contained added water.	„ paste	3	Tins found to be blown.
„ waste	2	No methyl violet present.	Flour	2	Contained foreign matter in the form of chlorinated fatty compounds.
Beetroot, pickled	1	Found to contain saccharin.	„	1	Available carbon dioxide below standard.
Bread	106	Physical characteristics unsatisfactory.	Ginger ale	2	Found to contain saccharin.
„ brown	37	Deficient in crude fibre.	Golden shandy drink	1	„ „ „
„ wholemeal	3	„ „ „	Grape - fruit fruit juice	1	Deficient in fruit juice.
„ wheatmeal	3	„ „ „	cordial.		
Butter	3	Contained excess water.	Jam (berry)	8	Found to contain a considerable proportion of apple jam.
„	1	Found to be rancid.	„	1	Unsuitable for human consumption.
Cherries in maraschino flavouring.	1	Preservative not declared.	„	6	Deficient in fruit content.
Cherry cordial liqueur, imitation.	1	Deficient in sugar.	„	6	Contained extraneous phosphate.
Coffee, concentrated pure essence.	1	Deficient in caffeine.	Kola	3	Found to contain saccharin.
Coffee and chicory essence	3	„ „ „	Lemon butter	2	Found to contain foreign fat.
Confectionery (chocolate easter egg).	1	Infested with insects.	„	4	Deteriorated and unfit for human consumption.
Cordials	1	Unfit for sale.	Lemon cordials, drinks, etc.	5	Deficient in fruit juice.
Cream	10	Deficient in milk-fat.	„ „ „ ..	4	Found to contain saccharin.
Cream substitutes	3	Found to be artificially coloured.	„ „ „ ..	1	Contained added organic acid.
Fish	8	Unsuitable for human consumption.			
„	2	Preservatised and incorrectly labelled.			
Carried forward	196		Carried forward	253	

Nature of Sample.	Number of Adulterated Samples.	Particulars of Adulteration.
Brought forward	253	
Lime cordials, drinks, etc.	5	Deficient in fruit juice.
" " " "	1	Deficient in fruit juice and citric acid.
" " " "	1	Deficient in fruit juice, citric acid and sugar.
" " " "	2	Found to contain saccharin.
Margarine	4	Found to be artificially coloured.
Meat, fresh	23	Illegally preservatised.
" minced	223	" "
" sausages	224	Excess of permitted preservative.
" sausage casing	1	Contained zinc chloride.
" tripe	3	Illegally preservatised.
" "	4	Did not comply with limits of pH.
" smallgoods	4	Found to be unsatisfactory.
" smoked mutton	4	Found to be artificially coloured.
Milk, fresh	345	Deficient in milk-fat.
" "	211	Contained added water.
" "	15	Deficient in milk-fat and contained added water.
" "	1	Contained dirt.
" powdered	2	Rancid and unsuitable for human consumption.
Olives	8	Unsuitable for food.
Orange drinks	4	Found to contain saccharin.
Passionfruit drinks	1	Contained added phosphoric acid.
" " "	1	Contained excess preservative.
Peaches, unsweetened, tinned.	1	Unsuitable for human consumption.
" " "	1	Proportion of tins contaminated with hydrogen sulphide.
Pears, tinned	1	Deficient in fruit content.
Peas, tinned	2	Found to be artificially coloured.
Pepper	2	Contained foreign starch.
Pickles	2	Fermented.
"	11	Not labelled according to regulations.
"	2	Found to contain saccharin.
Pineapple fruit juice cordial	1	Found to contain excess preservative, saccharin and artificial flavouring matter.
Raspberry fruit juice cordial	1	Contained artificial flavouring matter.
Raspberry imitation cordial	1	Deficient in sugar.
Rations, military	3	Unfit for food.
Refrigerator shelving, cadmium plated.	1	Did not comply with Pure Food Act.
Soap, liquid	3	Contained excess free caustic alkali.
Soda squash	1	Incorrectly labelled.
Spirits	8	Found to contain added water.
" (overproof rum)	3	Found to be underproof.
Tomato sauce	1	Found to contain benzoic acid.
Walnuts, shelled	1	Unfit for human consumption.
Wine	5	" " "
Total adulterations	1,391	

Samples Submitted for the Public Services of the State.

The samples submitted for the public services of the State amounted to 2,556, a brief summary of which is shown hereunder:

Subsidised Institutions required the examination of 331 samples consisting of blood, cerebrospinal fluid, foodstuffs, drugs, urine, etc.

The Government Stores Department submitted 391 samples for examination, including drugs and pharmacopoeial substances, inks, insecticides, lubricants, paints, soaps, etc.

Police Authorities forwarded 190 exhibits for examination in connection with criminal investigations and forty-one in

regard to the administration of the Police Offences Amendment (Drugs) Act; the following table gives details of the various charges investigated:

Particulars of Charge.	Number of Exhibits.
CRIMINAL INVESTIGATIONS.	
Alleged breach of Liquor Act.....	3
Arsenical poisoning	6
Attempted poisoning	2
Attempted suicide	3
Break, enter and steal	5
Doping of racehorses	1
Driving under influence	5
Indecent assault	10
Fail to stop after accident	6
Manslaughter	5
Miscellaneous	45
Murder	20
Rape	4
Suicide	13
Suspected poisoning.....	22
Theft	15
Uncertified deaths	25
	190

POLICE OFFENCES AMENDMENT (DRUGS) ACT.	
Cocaine	1
Morphine	39
Mariuanha	1
Total Exhibits	231

Coroners' Inquiries.—Coroners required the examination of 772 exhibits in connection with 311 deaths which formed the subject of police investigation. The following tables gives particulars of the results of chemical examination:

Nature of Exhibit.	Result of Chemical Examination.	Number of Deaths.
Viscera (stomach and contents, intestines and solid organs).	Negative for poison	63
" " " "	Arsenic	7
" " " "	Barbital	1
" " " "	Barbiturate	4
" " " "	Barbituric acid	2
" " " "	Bromine	1
" " " "	Carbital	1
" " " "	Chloral hydrate	2
" " " "	Cyanide.....	5
" " " "	Formaldehyde	1
" " " "	Hexaethyltetraphosphate	1
" " " "	Lead	2
" " " "	Mercury	1
" " " "	Nicotine	1
" " " "	Paraldehyde	2
" " " "	Phenobarbital	4
" " " "	Phenobarbitone	2
" " " "	Prominal	1
" " " "	Quinine and salicylic acid	1
" " " "	Salicylic acid	1
" " " "	Salicylic acid, phenacetin and caffeine ...	1
" " " "	Sedormid	1
" " " "	Strychnine	11
" " " "	Strychnine and quinine	1
" " " "	Thallium	1
Viscera and blood	Positive for chloral hydrate and potassium bromide.	1
" " "	Positive for chloral hydrate and alcohol...	1
" " "	Negative for poison; positive for alcohol	12
" " "	Negative for poison and alcohol	4
" " "	Positive for phenobarbital and alcohol ...	1
" " "	Positive for bromide; negative for alcohol	1
" " "	Positive for alcohol	1
" " "	Positive for arsenic; negative for alcohol	1
Viscera and urine	Positive for nembutal.....	2
" " "	Negative for poison and alcohol	2
" " "	Positive for arsenic; negative for barbiturate.	1
" " "	Positive for alcohol	1
" " "	Negative for poison; positive for alcohol	2
" " "	Positive for barbiturate	1
Viscera, blood and urine	Positive for potassium bromide and alcohol	3
Blood	Negative for alcohol	24
"	Positive for alcohol	59
"	Positive for alcohol and carbon monoxide	1
"	Positive for drowning	2
"	Negative for drowning	1
"	Positive for nembutal.....	1
"	Positive for carbon monoxide	8
"	Negative for carbon monoxide	1
Urine	Negative for alcohol	8
"	Positive for alcohol	33
"	Positive for phenobarbital	1
Blood and urine	Positive for alcohol	12
"	Positive for alcohol; negative for drowning	1
Blood, urine and cerebrospinal fluid.	Positive for alcohol	1
Blood and cerebrospinal fluid.	Positive for alcohol	2
" " "	Negative for alcohol	1
Tissues	Negative for poison	1
Urine and stomach contents.	Positive for alcohol	2
Total Deaths		311

The Police Department also submitted four exhibits of animal viscera for examination in connection with the suspected poisoning of animals and, in each case, strychnine was found to be present.

State municipal and departmental authorities submitted 367 samples of water in connection with the supervision and chemical treatment of water supplies and swimming pools in country districts, and ninety-four samples for examination for the purpose of checking the efficiency of sewage installations and the control of the discharge of trade wastes and drainage into public places.

Industrial hygiene authorities submitted 366 samples for examination in connection with claims under the Workers' Compensation Act, the diagnosis of illness due to occupational causes, conditions of employment in workshops and factories, the ventilation of public halls and theatres, etc.

Miscellaneous authorities submitted 282 samples for examination, including foodstuffs, disinfectants, bedding materials, insecticides, lubricants, human hair and nails, urine, etc.

TABLE I.—Samples examined during the year 1950 for the purposes of the administration of the Pure Food Act, 1908:

Nature of Sample.	Submitted by.	Number Ex- amined.	Number Adulter- ated or Falsely Described.
Acetylsalicylic acid powder	Food Inspectors	2	...
Apple juice	"	23	2
Apricot nectar, tinned	"	1	...
Apricots in syrup, tinned	"	2	...
Baked beans	"	12	...
Baking powder	"	5	...
Banana butter	"	2	1
Beer	"	66	8
Beetroot, pickled	"	3	1
Blackberries, fresh	"	1	...
Bread	"	365	149
Burandy cordial	"	1	...
Butter	"	30	4
Butter food flavouring	"	2	...
Cabbages	"	1	...
Capers in vinegar	"	1	...
Cherries in marashino syrup	"	1	1
Cherry cordials	"	5	1
Cheese, cheddar	"	2	...
Cigarettes	"	1	...
Citrus cup	"	1	...
Cloves compound cordial	"	2	...
Cocktail cordials	"	3	...
Cocoa	"	2	...
Coffee	"	4	1
Coffee and chicory	"	13	3
Confectionery	"	2	1
Cooking utensils, steel.....	"	1	...
Cordials	Municipal Inspectors ...	2	1
Corn, sweet	Food Inspectors	1	...
Cornflour	"	1	...
Cough mixture	"	1	...
Cream	Milk Board	110	4
Cream	Food Inspectors	132	6
Cream substitute	"	3	3
Cream of Tartar	"	2	...
Creaming soda	"	9	...
Dessert	"	2	...
Deodorant	"	1	...
Disinfectant	"	1	...
Dripping	"	1	...
Fairy Floss	"	5	...
Fish, smoked, fresh, tinned, etc.	"	34	17
Fish paste	"	3	3
Flour	"	16	3
Foodstuffs	"	20	...
Fruit juice extractor	"	1	...
Fruit salad, tinned	"	2	...
Gelatine	"	1	...
Ginger ale cordials, etc.	"	11	2
Ginger spread	"	1	...
Golden shandy drink	"	1	1
Gooseberries, tinned	"	1	...
Grapefruit cordials, etc.	"	9	1
Honey	"	4	...
Ice cream	"	70	...
Icing sugar	"	6	...
Insecticide.....	"	1	...
Jam	"	30	21
Kola	"	12	3
Lemon butter	"	11	6
Lemon drinks	"	49	10
Lime drinks	"	29	9
Malt extract	"	1	...
Margarine	"	12	4
Meal	"	2	...
Melon	"	1	...
Meat, fresh	"	804	23
"	Municipal Inspectors ...	11	...
" minced	Food Inspectors	1,780	219
"	Municipal Inspectors ...	117	4
" sausages	Food Inspectors	2,561	210
"	Municipal Inspectors ...	141	14
" tripe	Food Inspectors	327	7
"	Municipal Inspectors ...	9	...
" smallgoods	Food Inspectors	163	4
" tinned	"	3	...
" sausage casing	"	1	1
" with sawdust	"	1	...
" pie	"	5	...
" smoked mutton	"	4	4
" corned beef	"	1	...

TABLE I—continued.

Nature of Sample.	Submitted by.	Number Ex- amined.	Number Adulter- ated or Falsely Described.
Milk, fresh.....	Food Inspectors, Metro- politan Districts.	4,575	105
" "	Municipal and Shire Inspectors, Metro- politan Districts.	1,294	11
" "	Food Inspectors, Country Districts.	1,151	128
" "	Municipal and Shire Inspectors, Country Districts.	1,663	106
" "	Milk Board	8,343	222
" powdered	Food Inspectors	2	2
Milk shake containers	"	1	...
Nickel silver fitting	"	1	...
Oil, edible	"	1	...
Olives.....	"	12	8
Orange drinks, cordias, etc.	"	55	4
Paraffin, liquid	"	1	...
Passionfruit drinks, cordials, etc.	"	10	2
Peaches, tinned	"	3	2
Pears, tinned	"	1	1
Peas, tinned	"	2	2
Pepper	"	9	2
Peppermint cordial	"	2	...
Pickles	"	29	15
Pineapple, tinned.....	"	3	...
Pineapple drinks, cordials, etc. ...	"	8	1
Plums, tinned	"	2	...
Potassium cyanide	"	1	...
Potato and marrow	"	1	...
Prunes with mock rice, canned ...	"	1	...
Punch cordial	"	1	...
Raspberries, tinned	"	1	...
Raspberry drinks, cordials, etc.	"	5	2
Ration, army	"	3	3
Refrigerator shelving	"	1	1
Sarsaparilla cordials, drinks, etc.	"	3	...
Smoking cure	"	1	...
Soap	"	6	3
Soda squash	"	1	1
Spices.....	"	2	...
Spirits	"	169	10
"	Metropolitan Licensing Inspectors.	1	1
Strawberry flavoured cordial ...	Food Inspectors	1	...
Summer or temperance drink ...	"	1	...
Sun tan solution	"	1	...
Tarry matter	Municipal Inspectors ...	2	...
Tea	Food Inspectors	7	...
Tomato sauce	"	4	1
Tomato juice	"	4	...
Vanilla essence	"	2	...
Vegetables, strained, tinned	"	2	...
Vinegar, malt	"	8	...
Walnuts, shelled	"	1	1
Water	"	1	...
Wheat germ	"	1	...
Wine	"	14	5
Total		24,495	1,391

TABLE II.—Samples examined during the year 1950 for the Public Services of the State.

Authority Submitting.	Nature of Sample.	Number of Samples.
Subsidised Institutions	Blood	1
	Cerebrospinal fluid	1
	Clothing	1
	Faeces	1
	Fruit juice	2
	Hair, human	20
	Herb infusion	1
	Magnesium trisilicate	1
	Meat, fresh	175
	Medicine	1
	Milk, powdered	1
	Milk, human	38
	Nails, human	14
	Skin, human	1
	Soap	4
	Stomach contents	10
	Tablets	1
	Urine	54
	Vomit	3
	Water	1
Government Stores Department...	Acetic acid	1
	Acetone.....	3
	Alcohol, absolute.....	17
	Ammonium acetate solution	2
	Ammonium bromide	1
	Ammonium carbonate	2
	Ammonium chloride	4
	Ammonium sulphate	1
	A.P.C. tablets	4
	A.P.C. powders	2
	Arsenical solution	1
	Ascorbic acid tablets	4
	Barbitone tablets	2
	Barium sulphate	36
	Belladonna, tincture of	1
	Belladonna, concentrated tincture of	1
	Benzoic acid.....	1
	Caffeine, pure	3
	Carried forward	417

TABLE II.—continued.

Authority Submitting.	Nature of Sample.	Number of Samples.
	Brought forward	417
	Caffeine citrate	1
	Calcium chloride	2
	Calcium lactate tablets	2
	Calomel tablets	3
	Cascara sagrada tablets	2
	Cascara sagrada, liquid extract of	3
	Chalk, prepared	4
	Chalk, precipitated	2
	Chalk, powdered French	1
	Chloroform	6
	Chloral hydrate	4
	Cleansers	11
	Cloves, oil of	1
	Codaphos tablets	3
	Colocynth, compound tablets of ...	1
	Custard powder	2
	Digitalis, concentrated tincture of	1
	Disinfectants	39
	Dover tablets	1
	Ephedrine hydrochloride tablets ...	2
	Ephedrine and phenobarbitone tablets.	2
	Ergot and strychnine tablets	2
	Ergot, liquid extract of	2
	Ether, anaesthetic	2
	Fehlings solution No. 2	1
	Ferricperchloride, strong solution of	2
	Ferrous sulphate	11
	Gelsemium, concentrated tincture of	1
	Glycerine and borax	2
	Hexamine tablets	2
	Hydrochloric acid	1
	Ink	4
	Ink powder	2
	Insecticides	2
	Iodine, tincture of	1
	Ipecacuanha, tincture of	3
	Junket tablets	1
	Lactic acid	1
	Liquorice, liquid extract	1
	Liquorice, compound powder	1
	Lubricants	3
	Magnesium carbonate, heavy	6
	Magnesium carbonate, light	1
	Magnesium sulphate	1
	Mercuric iodide	1
	Methyl alcohol	1
	Morphine hydrochloride	1
	Nux vomica, liquid extract	1
	Opium, concentrated camphorated tincture of.	3
	Opium, tincture of	2
	Paraldehyde	6
	Phenacetin	11
	Phenacetin tablets	2
	Phenazone	2
	Phenobarbital tablets	9
	Phenobarbital, soluble	3
	Phenolphthalein, compound tablets	1
	Phosphoric acid	2
	Potassium bicarbonate	1
	Potassium bromide tablets	1
	Potassium chlorate	3
	Potassium nitrate	5
	Potassium sulphate	1
	Q.E.S. tablets	6
	Quinine sulphate	2
	Resorcin	1
	Rhubarb root, powdered	1
	Saccharin tablets	2
	Salicylic acid	1
	Santonin and calomel tablets	1
	Soap	42
	Sodium benzoate	1
	Sodium chloride	4
	Sodium iodide	1
	Sodium nitrate	1
	Sodium nitrite	2
	Sodium salicylate tablets	2
	Sodium sulphate	1
	Sodium thiosulphate crystals	1
	Sodium and potassium tartrate ...	1
	Squill vinegar	2
	Stilboestrol tablets	4
	Sulphanilamide powder	1
	Sulphanilamide tablets	1
	Sulphonol tablets	1
	Theobromine, compound tablets ...	2
	Carried forward	700

TABLE II.—continued.

Authority Submitting.	Nature of Sample.	Number of Samples.
	Brought forward	700
	Theobromine and phenobarbitone	1
	Theobromine and sodium salicylate	1
	Trinitrin tablets	2
	Turpentine, oil of	1
	Urea	1
	Vegetable laxative tablets	1
	Vitamin B1 tablets	8
	Waterproof sheeting	1
	Xylol	3
	Zinc sulphate	3
Police Department	Criminal Investigations	231
	Coronial inquiries (human viscera, blood, etc.).	772
	Animal viscera.....	4
Municipal and Departmental Authorities.	Water	367
	Sewage	94
Industrial Hygiene Authorities ...	Air	74
	Benzene	1
	Blood	1
	Cosmetic pencil	1
	Dust	68
	Water	1
	Hair, human	8
	Insulation board	1
	Liquid	5
	Lung, human	5
	Motor spirit	1
	Nails, human	8
	Paint	9
	Paint thinners	3
	Phosphores	9
	Polish, French	2
	Polishing rouge	2
	Powder, red	1
	Rubber cement	1
	Soap	3
	Solvents	4
	Urine	154
	Welding rod	6
Miscellaneous Authorities	Apples, fresh	1
	Blood	16
	Bread	71
	Butter	1
	Cake	1
	Coconut oil	5
	Cod liver oil	4
	Cotton wool	1
	Crumpets	2
	Disinfectants	2
	Dust	6
	Fish sandwich	1
	Flock	40
	Flour, plain	1
	Flour, self raising	15
	Friars balsam	1
	Hair, human	12
	Honey	1
	Insecticides	3
	Lubricants	26
	Meat	1
	Medicine	1
	Milk container, aluminium	1
	Milk, fresh	1
	Milk, human	3
	Nails, human	9
	Olive oil	4
	Paint	3
	Paraffin laxative	1
	Rose hip syrup	1
	Sausages	2
	Sausage casing	1
	Semolina	3
	Tablets, charcoal	1
	Tea	1
	Urine	27
	Viscera, animal	1
	Wheat gluten	2
Department of the Army.....	Baking powder	2
	Ice cream mix	1
	Linseed oil	4
	Sausages	1
	Pepper	1
	Total	2,838

PURE FOOD ACT, 1908-1944.

Report of the Chief Inspector on the General Administration of the Pure Food Act, 1908-1944, for the year ended 31st December, 1950.

Staff.

Chief Inspector: PHILLIP C. WILLIAMS, M.R.San.I. One deputy chief inspector; one senior inspector—Newcastle; ten metropolitan inspectors; two country inspectors.

I herewith submit particulars of the work performed by the Pure Food Branch for the year ended 31st December, 1950.

This work includes the supervision of all places where food or drugs are prepared, stored or exposed for sale, together with the incidental duties required to be carried out in order to secure the wholesomeness, cleanliness and freedom from contamination of food and drugs, and compliance with the legal provisions as set out in the Act and Regulations thereunder.

Milk.

Six thousand four hundred and twenty samples of milk were purchased for analysis by departmental officers and 2,635 by local authorities, making a total of 9,718 for the year. Two hundred and ninety-eight were not in accordance with the standard, fifty-nine warnings were issued, and 239 traders were prosecuted. The fines and costs imposed amounted to £934 18s.

Bread.

Special attention has been paid to the method of delivery as well as the quality of bread. Three hundred and sixty-three samples were taken for analysis, sixty-two warnings were issued, and twenty-four traders were prosecuted.

In connection with the delivery of bread eighteen prosecutions were issued for exposing bread to contamination. The total fines and costs being £115 11s.

Meat.

Five thousand six hundred and seventy-two samples were taken for analysis. Fifty-eight warnings were issued, and 257 traders were prosecuted and £1,271 11s. 6d. was collected in fines and costs.

Beer, Wine and Spirits.

Two hundred and fifty-two samples were submitted for analysis. There were four warnings, nine prosecutions, and £19 1s. collected in fines and costs.

Hotels were regularly inspected, and one prosecution was launched for failure to use colouring matter in beer driptrays; £3 10s. was collected in fines and costs.

Cordials.

Two hundred and twenty-six samples were taken for analysis, fourteen warnings were issued and eighteen prosecutions were launched, and fines and costs amounting to £51 5s. were collected.

Poultry.

The arrangement with the poultry selling agents at the Municipal Poultry Markets, by which poultry is examined, resulted during the year in the seizure and destruction of 15,312 head of poultry as unfit for human consumption. It is possible that many of these birds would have found their way to certain food channels, but for the action taken.

Seizure and Destruction of Food.

During the year it was found necessary to seize a large quantity of foodstuffs. The seizure comprised 30 tons of assorted food and drugs, also 92,685 tins, 6,097 packets, and 838 bottles.

General Breaches of the Act and Regulations.

Breaches included poisonous substances in food containers, unclean food appliances, unclean vehicle, smoking on food premises, carrying water on a milk cart, bread wrapped in newspaper, failure to keep premises free from rats, flies, cockroaches, mice, animals, etc.

In addition, 11,845 premises were inspected resulting in 100 prosecutions being launched and £578 11s. collected as fines and costs.

Medical Practitioners Act, etc.

Special work has been carried out under the Medical Practitioners, Dental and Optometrists Acts.

Survey in regard to the Bacteriological Condition of Eating and Drinking Utensils.

Last year the Department inaugurated a special food-handling campaign which was aimed at improving the stand-

ards of hygiene and cleanliness in restaurants, hotels and cafes, especially in regard to the cleansing of eating and drinking utensils.

A special film was produced, cards were displayed in trams and posters on hoardings, and a special folder on proper methods for cleansing eating and drinking utensils was printed for distribution to proprietors of eating and drinking establishments.

It is now proposed to launch an educational drive by conducting special meetings in various centres where lectures supplemented by screening of selected films can be shown to proprietors of eating establishments.

Staff.

The establishment of the Branch provides for a staff of fourteen inspectors. This establishment existed in 1920 when the population of the State was 2,225,242. During the intervening thirty years the population has increased by 1,134,127 and now in 1950 stands at 3,225,242, i.e., an increase of approximately 60 per cent. This means that to police the provisions of the Pure Food Act effectively, the staff should be increased by at least eight units.

Attached is a summary of the number of samples taken during the year, foodstuffs destroyed, inspections made, prosecutions launched with fines and costs imposed.

Summary of Work performed by Pure Food Officers during the year ended 31st December, 1950.

TABLE I.

Samples of Milk.	Samples taken by Departmental Officers.	Samples taken by Municipal and Shire Council Inspectors.	Total.
Number of samples taken from all parts of the State	6,420	2,635	9,055
Number of samples below standard	213	85	298
Number of warnings	40	19	59
Number of prosecutions	173	66	239
Amount of fines and costs	£ s. d. 661 11 0	£ s. d. 273 7 0	£ s. d. 934 18 0

Food and Drugs other than Milk—	Total.
Number of samples taken from all parts of the State	7,040
Number of Prosecutions	330

Amount of Fines and Costs	£ s. d. 1,600 19 6
---------------------------------	-----------------------

Food unfit for consumption seized and destroyed—
The seizures comprised over 30 tons of assorted food and drugs, also 92,685 tins, 6,097 packets and 838 bottles of assorted food. 15,312 head of poultry were destroyed as being unfit for the food of man.

Inspection of premises used for the preparation, sale and storage of food—	
Number of premises inspected in all parts of the State	11,845
Number of prosecutions	18
Amount of fines and costs	£ s. d. 210 11 0

General Breaches of the Act and Regulations—	
Number of Prosecutions	82
Amount of fines and costs	£ s. d. 368 0 0

TABLE II.

Summary of Legal Proceedings by Officers of the Pure Food Branch during the year ended 31st December, 1950.

	Prosecutions.	Fines and Costs.
Adulterated milk.....	173	£ s. d. 661 11 0
Adulterated food and drugs	327	1,590 19 6
Unclean premises	18	210 11 0
General breaches	82	368 0 0

TABLE III.

Summary of Work carried out by Pure Food Officers under the Pure Food Act 1908-44 from the Date of its Operation October, 1909, to 31st December, 1950.

	Prosecutions.	Fines and Costs.		
		£	s.	d.
Number of premises inspected (377,622)	2,723	14,475	19	6
General breaches of the Act	2,450	8,172	12	0
Milk samples (343,299)	6,985	28,857	13	0
Food and drug samples (165,658)...	8,312	25,164	3	2
Food and drug seizures	430	1,870	7	0
	20,900	78,540	14	8

General Breaches of Pure Food Act and Regulations.
Particulars of Prosecutions.

Offence.	No.	Fines and Costs.		
		£	s.	d.
Smoking on food premises or during the handling of food for sale	13	52	15	0
Did sell unlabelled oysters.....	16	43	10	0
Did expose bread and other food to contamination	18	49	10	0
Did expose meat to flies and dust	1	3	13	0
Failure to use colouring matter in beer drip trays	1	3	10	0
Failure to keep premises free from rats	1	20	10	0
Failure to keep premises free from flies	2	17	0	0
Failure to keep premises free from cockroaches	2	7	1	0
Failure to keep premises free from mice	1	11	0	0
Failure to keep premises free from dogs	3	18	11	0
Did use unclean food appliances	5	35	19	0
Unclean bread trough	1	2	10	0
Poisonous substances packed in food containers	2	26	0	0
Unclean vehicle used for carriage of food	1	10	10	0
Unclean flour sifters	5	13	19	0
Unclean refrigerator	1	4	0	0
Bread wrapped in newspaper	4	7	10	0
Did carry water on milk-cart	1	4	10	0
Did sell adulterated poultry	2	15	10	0
Did sell adulterated chocolates	2	21	0	0
Total	82	368	0	0

FOOD AND DRUG SAMPLES.

Particulars of Samples of Food (other than Milk) and Drugs taken for Analyses by Departmental Officers during the year 1950.

Sample.	No. of Samples.	Warn-ings.	Prosecu-tions.	Fines and Costs.		
				£	s.	d.
Baking powder	5	...	...	...	...	...
Beer.....	70	...	...	3	10	0
Butter	33	3	1	2	10	0
Bread	363	62	24	66	1	0
Cream	127	3	3	24	0	0
Coffee and chicory	17	3	1	5	15	0
Cheese	2	...	...	...	...	...
Confectionery	2	...	2	21	0	0
Condiments	3	...	1	...	...	...
Cordials	226	14	18	51	1	0
Drugs	5	...	2	36	0	0
Disinfectants	2	...	...	...	...	...
Essences	5	...	...	...	...	...
Fruit, preserved	12	...	...	...	...	...
Fish	25	...	4	16	0	0
Flour	14	...	...	12	10	0
General	138	4	7	13	0	0
Honey	4	...	...	...	...	...
Ice cream	54	4	...	...	...	...
Jam	32	4	4	59	0	0
Margarine	9	...	...	...	...	...
Malt.....	1	...	...	...	...	...
Meat	5,672	58	257	1,271	11	6
Spirits, wines	182	4	6	19	1	0
Soap	6	...	...	...	...	...
Sugar	6	...	...	...	...	...
Tea	7	...	...	...	...	...
Vinegar	7	...	...	...	...	...
Vegetables	10	...	...	...	...	...
Oils, edible	1	...	...	...	...	...
Total	7,040	159	330	1,600	19	6

SEIZURES.

Particulars of food seized as unfit for human consumption and destroyed by Officers under the Pure Food Act during the period 1st January to 31st December, 1950.

Article.	Tins.	Packets.	Bottles.	Weight.		
				t.	e.	q.
Assorted foods	9,109	32	73	27	10	4
Condiments .....	...	...	580	...	...	...
Confectionery.....	...	2,250	...	0	2	0
Cheese .....	...	458	...	...	...	...
Cordials	24	...	...	...	...	...
Drugs .....	...	441	...	...	...	...
Fruit, preserved	54	218	...	2	6	5
Fish	77,974	646	...	0	5	1
Flour .....	...	80	...	...	...	...
Jam	4,090	...	81	...	...	...
Meat	46	...	...	0	1	0
Nuts .....	...	20	...	0	5	0
Poultry (15,312 head).....	...	...	...	...	...	...
Soup .....	...	1,872	...	...	...	...
Spirits .....	...	...	104	...	...	...
Vegetables	1,388	...	...	0	3	1

A total of 30 tons 14 cwt. of assorted food and drugs; 92,685 tins, 6,097 packets and 838 bottles of the same and 15,312 head of poultry.

INSPECTIONS.

Inspections in Country Districts during 1950 by Officers of the Pure Food Branch.

District.	No. of Inspections
Albury	59
Armidale	8
Barraba	9
Bathurst	22
Bellingen	23
Berrigan	26
Blue Mountains	28
Bombala	8
Broken Hill	17
Carrathool	8
Casino	12
Coolah	11
Coonamble.....	15
Coonabarabran	12
Cowra	29
Culcairn	22
Dorrigo	5
Dubbo	13
Dungog	5
Forbes	19
Gilgandra	12
Grafton	18
Gulgong	28
Gundagai	13
Guyra	14
Holbrook	8
Inverell	33
Kearsley	30
Kiama	13
Lake Macquarie	69
Leeton	4
Lithgow	24
Lower Hunter	7
Lyndhurst	17
Macleay	1
Maitland	56
Manilla	9
Molong	7
Mudgee	6
Murrumburrah	19
Muswellbrook	53
Nambucca	40
Newcastle	377
Oberon	5
Orange	39
Parkes	17
Peel	8
Port Stephens	2
Queanbeyan	12
Seone	27
Shoalhaven	19
Singleton	23
Tamworth	78
Taree	16
Temora	17
Tumut	23
Uralla	11
Wade	11
Wagga	29
Wollongong	53
West Wyalong	24
Yass	17
Total Inspections—	
Country	1,640
Metropolitan	10,205
Grand Total	11,845

Prosecutions for dirty premises, 18.
Amount of fines and costs, £210 11s.

ANNUAL REPORT OF THE ACTIVITIES OF THE HEALTH INSPECTION BRANCH DURING THE YEAR ENDED 31st DECEMBER, 1950.

Staff.

Chief Health Inspector, G. A. Garrow, M.R.San.I., T.P. Cert.
Deputy Chief Health Inspector, K. R. Horne.
Ten health inspectors.
Two surveyors.
One female tracer.
One junior clerk.

During the year a senior female tracer was appointed to this Branch to assist with the greatly increased volume of plan, search and other work relating to land notified as unhealthy building land under section 55, Public Health Act, 1902-1944. She commenced duty on 14th August, 1950.

Country and Metropolitan Districts—Routine and General Inspections, etc.

Towns.—A total of ninety-one inspections were made—thirty-six primary and fifty-five re-inspections.

Insanitary Buildings.—Forty-two buildings were inspected and the respective local authorities were requested to cause necessary repairs or alterations to be carried out.

Shortage of housing accommodation made it inadvisable to recommend the issue of Closing Orders in other than extreme cases, therefore only one Closing Order Certificate was recommended.

Guest and Boarding Houses.—Sixty were inspected and suitable action recommended where found necessary.

Shop Premises.—Nine hundred and forty-eight were inspected and appropriate action taken.

Hospitals, Institutions and Schools.—Inspections were made of 134 separate premises, and necessary action recommended.

Public Halls and Theatres.—One hundred and nine inspections were made and sixteen air tests were carried out in conjunction with an officer from the Division of Industrial Hygiene.

Hotel Premises.—One hundred and fifty-eight were inspected and reports and recommendations were forwarded to the controlling authority for necessary action.

Swimming Pools.—Three inspections of swimming pools and treatment plants were made and reports furnished thereon.

Cattle Slaughtering Premises and Abattoirs.—Twenty-six inspections of slaughtering premises and fourteen inspections of abattoirs were made and appropriate action taken.

Noxious Trades.—Seven hundred and fourteen inspections and re-inspections of Noxious Trades premises were made and where found necessary, repairs, etc., were required to be carried out.

In one instance, legal proceedings were instituted against a trader.

The provisions of the Noxious Trades Act were extended to the Municipality of Deniliquin.

Removal of Dead Stock from Flemington.—Thirteen thousand four hundred and seventy dead animals were removed from Flemington Sale and Trucking Yards and the Abattoir by a private firm to its knackery premises and in no case were complaints received in this office respecting these activities.

Flock and Bedding Material.—Thirty-four samples of flock and bedding material were obtained and three mattresses and pillows were purchased for examination.

Seventy-two premises were inspected and suitable action taken where found necessary.

Camps, Showgrounds, Cemeteries, etc.—Forty-three inspections were made and where necessary, suitable action was recommended.

Saleyards and Proposed Sites.—Five inspections were made of saleyards and suitable action recommended. One inspection was made of a site for a proposed saleyard.

—Scavenging Districts, Sanitary Depots: Proposed Sites and Garbage Incinerators.—Twenty-five descriptions and plans of proposed scavenging districts were examined, and a number of these were amended or re-cast in this office.

One hundred and twenty-seven inspections of sanitary depots were made and, where found necessary, suitable action was taken.

Sixteen proposed sites for sanitary depots and two proposed sites for garbage incinerators were inspected, and those found unsuitable were not recommended.

Approval to bury nightsoil in ploughed furrows was recommended in two instances.

Sanitary Services.—Three investigations of sanitary services were made and when warranted, suitable action was taken.

Septic Tanks, Sewage Treatment Works, Private and Public Water Supplies.—Two thousand five hundred and sixty-two plans of proposed septic tanks were examined and reported upon and, where found necessary, were either amended, or not recommended for approval. Two thousand three hundred and forty-nine proposed sites were inspected and a number were found unsuitable, in consequence of which approval to instal the septic tank could not be recommended.

One hundred and twenty-eight existing septic tanks and sewage treatment works, including effluent disposal areas were inspected and suitable action recommended where found necessary.

Two samples of effluent were collected for examination.

Five inspections were made of public and private water supplies, and thirty samples of water were procured for examination.

Four investigations were made respecting the source and storage of water supplies.

Suitable action was recommended where found necessary.

Councils Required to Appoint Health Inspectors.—Eleven Local Government Councils were requested to appoint certificated health inspectors, following investigations of their respective areas. None of these councils appointed such inspectors during 1950.

Unhealthy Building Land.—One hundred and fifty-three surveys and 408 inspections and check surveys were made of land considered unfit for building purposes.

Thirty thousand three hundred and nineteen inquiries were made by solicitors and others, and these were revenue producing to the extent of £5,307 7s. 6d.; of these a fee of 2s. 6d. was charged for 20,179 inquiries and 5s. for 10,140 inquiries.

The fee increase from 2s. 6d. to 5s. was charged from 1st September, 1950.

This work has greatly increased during the past three years, as will be seen from the following figures:—

	Inquiries.
1948	16,168
1949	23,388
1950	30,319

Twenty-four plans of notified areas were re-drawn and one new plan for a proposed area was compiled. Ten other plans were drawn and twenty special articles were printed by the female tracer employed in this office since August, 1950.

In addition, searches were made and plans prepared from plans and data at the Registrar-General's office in connection with inquiries made by solicitors relating to notified land.

Certain lands in the municipality of Bankstown and the shire of Shoalhaven were notified as unfit for building purposes, by notice in the *Government Gazette*.

Surveys are being effected, and plans, specifications and notices are being prepared of several areas of land in various parts of the State and which are considered unfit for building purposes.

Owing to the enormous increase in survey work and the preparation of plans, etc., connected therewith, a number of applications from local councils respecting land situated in their respective areas cannot yet be attended to.

Rat Infestation.—One thousand six hundred and eighty-seven rats were trapped. These rats were examined in the microbiological laboratory and were found free from plague.

Twenty-two investigations were made respecting alleged rat infestation and where found necessary, suitable action was taken.

Sydney Wharves.—Ninety-two visits were made of the wharves, and the controlling authorities notified where repairs, eradication of rats, etc., were considered necessary.

Re-inspection of the premises disclosed that the work required has been, or is being carried out.

Nuisances.—Forty-five investigations of complaints respecting drainage, pollution of water courses, and other alleged nuisances were made following which action considered necessary was recommended.

Sorting of Dead Wool.—Five visits were made to premises in which this process was carried on, and where considered necessary, advice was given.

Samples of Water, Effluent, Air and Soil.—Seventy-seven samples were collected for chemical analysis and microbiological examinations, on results of which, suitable action was recommended.

Dairies Supervision Act.—No applications were received during the year from shire councils to be proclaimed local authority under this Act.

Legal Proceedings.—Fourteen prosecutions were instituted for breaches of various Acts, Regulations and Ordinances, and fines and costs amounting to £102 12s. were imposed.

In one instance, an appeal by the applicant was successful.

Departmental officers appeared as witnesses in eleven prosecutions instituted by councils at the request of this Department.

Investigations on Behalf of the Dental Board.—Seven investigations were made on behalf of the Dental Board, in

connection with alleged illegal practice, and reports thereon were submitted to that Board.

Baby Health Centres.—Four baby health centres were inspected, and suitable action was recommended where necessary.

Aborigine Reserves.—Four aborigine reserves were inspected and appropriate action recommended.

Knackers.—Forty inspections were made and where found necessary, suitable action was recommended.

Committees.—An officer of this Branch represents the Department on the following committees:—

- Building Regulations Advisory.
- Cyanide Examination.
- Country Abattoir Sites, Standards Association.

Application for Cyanide Fumigation Operator's License.—One candidate presented himself for the required examination and was recommended.

PRIVATE HOSPITALS ACT, 1908.

Report on the operation of the above Act for the year ending 31st December, 1950, by A. J. Hope, M.B., Ch.M.

There were remaining at the end of this period 229 licensed private hospitals representing a loss for the year of 33, having a total bed capacity of 3,234, a loss of 254. Of these 229 hospitals, 125 were in the metropolitan area and 104 in the country, a loss in each place of 14 and 19 respectively.

As has been the case in previous years, the loss affected those which catered for medical, surgical and lying-in and those for lying-in only; the figure for medical and surgical hospitals was the same as that of last year, seventy-eight.

All relevant information is shown on the following Table 1.

	Hospitals.				Number of Beds.			
	Medical, Surgical, Lying-In.	Medical and Surgical.	Lying-In.	Total.	Medical, Surgical, Lying-In.	Medical and Surgical.	Lying-In.	Total.
Sydney	35	60	30	125	1,024	1,238	183	2,445
Country	56	18	30	104	437	196	156	789
Total	91	78	60	229	1,461	1,434	339	3,234
Variation with percentage.	Loss 18 16·5%	None	Loss 15 20%	Loss 33 12·6%	Loss 205 12·3%	Gain 34 2·4%	Loss 83 19·6%	Loss 254 7·2%

Supervision by the Department has been fully maintained but implementation of requests for improvements and renovations has been greatly delayed by licensees for the usual reasons of shortage of labour and materials.

Overcrowding as always, remains the most frequent infringement of the clauses of the Private Hospitals Act about which very little corrective action may be taken, for the obvious reason of public hardship caused by diminishing accommodation.

No hospital controlled by the Bush Nursing Association and Country Women's Association has closed permanently during the year.

TABLE II.—Showing classification of Private Hospitals licensed at 31st December with respect to size as signified by Number of Beds available.

Beds.	1.	2.	3.	4-5.	6-10.	11-20.	Over 20.	Total.
Metropolitan	2	5	5	9	38	35	31	125
Country	9	10	8	18	32	22	5	104
Total	11	15	13	27	70	57	36	229

As has always been the case, over the last few years, those hospitals which are licensed to receive six to twenty and over patients easily outnumber the other types; they number 163 or 71 per cent.

TABLE III.—Showing general decline in numbers of different types of hospitals (private) in the five-year period, 31st December, 1945, to 31st December, 1950.

	Total Hos-pitals.	Total Beds.	Medical and Surgical and Lying-In.	Medical and Surgical.	Lying-In.	1 Bed.	2 Beds.	3 Beds.	4-5 Beds.	6-10 Beds.	11-20 Beds.	Over 20 Beds.
1945	364	4,106	178	52	134	17	25	35	50	112	84	41
1950	229	3,234	91	78	60	11	15	13	27	70	57	36
Decrease	135	872	87	...	74	6	10	22	23	42	47	5
Increase .....	...	...	...	26	...	...	...	...	...	...	...	...
Percentage—												
Decrease	37	21·2	49	...	55·2	35·3	40	63	46	37·5	32·1	12·2
Increase .....	...	...	...	50	...	...	...	...	...	...	...	...

The only type of hospital showing an increase is that which is licensed to admit medical and surgical cases only.

MEDICO-LEGAL SECTION, ETC.

Report of the Government Medical Officer for Sydney for the year ended 31st December, 1950.

Medical Staff.

Dr. C. E. Percy, Government Medical Officer for Sydney.
Dr. S. H. Hankins, Medical Officer.
Dr. W. H. N. Randall, Medical Officer.

Hospital Admission Depot.

Assistants—three.
Night Officer—one.

Medical Work.

Admissions to Hospitals and Homes.—Three thousand, one hundred and sixty-two persons were admitted through the depot to metropolitan hospitals, 6,111 to State hospitals and homes, and 944 to convalescent homes. Admissions of country residents to metropolitan and base hospitals were also arranged. Ambulance removals arranged by the depot totalled 10,822.

Medical Examinations for State Government Departments.—Two thousand, five hundred and eighty-two were performed, some persons being visited in their own homes.

Medical Examinations of Police Recruits, etc.—One thousand and thirty-six recruits (probationary constables and police cadets) were examined (315 of these were re-examined at a later date), 388 probationary constables were examined after twelve months' service and 166 police cadets were given periodical examinations during the year.

Medical Examination of Sick Police.—Matters concerning the health of the Police Force are dealt with. The average daily number of police on sick report was ninety-two.

Medico-Legal Work.

Examinations of Alleged Rape and Criminal Assault Cases.—Ninety-five examinations were made, exhibits connected with such cases were examined, and evidence was given at various courts.

Work for the Coroner's Court.—The Government Medical Officer performed post-mortem examinations at the City Morgue in connection with suicides, homicides, violent and uncertified deaths.

Lunacy Work.—The Reception House at Darlinghurst is visited daily—1,573 cases were certified as insane.

Vaccinations against Smallpox.—One thousand, two hundred and fifty-nine vaccinations were performed for the Police Force and the general public, and an additional 493 International Certificates were issued confirming vaccinations by other practitioners.

Throat Swabbings.—Three hundred and seventy-eight swabbings were taken in cases of children being admitted to various homes.

Annual Report of the Government Medical Officer, Newcastle, for Year Ending 31st December, 1950.

Staff.

Dr. C. W. England—Government Medical Officer.

Medical Work.

1. Examination of persons for appointment to and fitness to continue in the Public Service for State Government Departments, and also for various allied bodies, 216.

2. Examinations of returned soldier applicants for travelling concessions, 117.

3. Examination of persons for Child Welfare Department, allowances, etc., 2.

4. Attendances at the Reception House, Newcastle, in connection with the examination and certification of insane patients, 232.

5. The G.M.O. is a Medical Referee and Member of the local Medical Board for the Workers' Compensation Commission, 32.

Medico-Legal Work.

1. The performance of autopsies at the request of the District Coroner in cases of homicide, suicide and violent and uncertified deaths, 256.

2. The examination of persons at the request of the Police Department in cases of rape, assault, etc., 18.

3. Attendance at various courts and the giving of evidence in connection with any of the above cases.

HEALTH EDUCATION AND PROPAGANDA.

Annual Report of the Publicity Officer for 1950.

The amount of money made available for health education purposes in 1950 was £10,000, an advance of £1,100 on the previous year, but still far below the record Vote of £32,000 in 1946-47. In consequence the Department's activities in this field were severely restricted. It was not possible to resume paid press and radio advertising, whilst rising costs meant that the Department had to pay two or three times more for the production of publicity material than it did in 1946. Hence the £10,000 voted for 1950 only went as far as a considerably smaller sum, say £4,000, in 1946.

Press Advertising.

Although the Department has not engaged in paid press advertising since 1947, it was successful in inducing a large number of country and suburban papers to print press articles issued at regular intervals by the Publicity Branch. On the occasion of Health Week in October, all city dailies devoted considerable space to special articles and features which were prepared in collaboration with departmental officers.

Broadcasting.

An inadequate vote again prohibited paid radio advertising. However, participation in the 1st National Health Week Campaign gave the Department an opportunity to secure free radio time which, if valued at commercial rates, would have been worth many thousands of pounds. Both commercial and national stations broadcast scripts, recorded talks and scatters

supplied by the Department and departmental officers gave special talks. The quality of the material was apparently very acceptable because most stations continue to broadcast scripts and other matter supplied by the Department.

Poliomyelitis Publicity Campaign.

A publicity campaign launched in December, 1949, was continued throughout 1950. Articles were issued at frequent intervals to the press, pamphlets were distributed through municipal and shire councils, and an instructional film for professional audiences—"Poliomyelitis: Diagnosis and Treatment"—was circulated throughout the State.

Food Handling Campaign.

An attempt was made during the year to improve the standards of hygiene in hotels, restaurants, etc. Pure Food and Health Inspectors, and members of the various trade associations (both employer and employee co-operated in an endeavour to eliminate certain unsatisfactory conditions, particularly in connection with the washing and cleansing of used utensils. Publicity material prepared, distributed or displayed included a 24-sheet poster; 7 small posters for display in kitchens; a 35 mm. film, with both 35 mm. and 16 mm. prints, for theatre release and screenings to smaller audiences; a folder containing information on correct washing-up methods; press and radio items on the subject. Lectures and film screenings were given to specialised groups, and are still continuing.

Poster and Sticker Displays.

Health education of the public through this medium was continued on the same basis as mentioned in earlier reports, viz.: (a) the display of 24-sheet posters on 55 metropolitan and country sites, (b) the display of stickers in 350 selected positions in metropolitan electric trains, (c) the display of sets of posters in 300 glazed frames on suburban railway stations, and in city underground stations, (d) the display of 1,000 bulkhead and several hundred side-rack cards in Sydney trams, (e) the display of metal frames on V.D. in public lavatories.

This year, 24-sheet poster sites were mainly devoted to the display of posters on Venereal Disease, but were replaced late in the year by posters on food handling.

Health Exhibition, Sydney Town Hall, 24th-28th October.

The Department was once again a major exhibitor at this Exhibition which has become an annual function in Sydney. Two new exhibits were entered; one, an elaborate pictorial display of the work which the Department performs on behalf of the community; the other, a display designed to show the public what the State's mental hospitals really looked like, together with examples of the attractive handcrafts executed by patients. As usual, the Department conducted a special theatrette where health films were screened continuously 12 hours a day for 5 days. Over 132,000 people visited the Exhibition, and 14,000 people viewed the Department's film programmes.

Other Health Exhibits and Displays.

During the year most of the Department's window display units were out of action, and as a result only 28 displays were arranged in the Sydney area.

On the other hand the Department entered exhibits at Agriculture Shows at Rylstone, Mudgee, Gulgong, Orange and Wellington, and at the Health Exhibition at Casino. The nature of these exhibits has been outlined in previous reports. The interest shown in the Department's displays justified the efforts involved.

Health Week created considerable activity in municipal and shire areas, and the Department gave assistance to thirty metropolitan and thirty-eight country councils. Many of these councils staged full-scale health exhibitions of their own, Manly and Leichhardt being notable examples.

Publications and Posters.

During the year the following publications were printed:—

Title.	Number of Copies.
"Healthy Motherhood" (reprint).....	45,000
"Our Babies" (reprint)	50,000
"Poliomyelitis" (new leaflet)	100,000
"Throat Infection" (new leaflet)	100,000
"Cleansing and Sanatising of Eating and Drinking Utensils" (new folder)	15,000
"Botulism" (reprint)	15,000
"Normal Diet for Expectant Mother" (reprint)	10,500
"Diet B—Low Salt Diet" (reprint).....	8,500
"Low Calorie Diet" (reprint)	8,500
"Salad Suggestions" (reprint)	2,000
"Money Saving Main Dishes" (reprint)	2,000
"Healthy Mouths" (donation from Australian Dental Association)	10,000

In addition, requisitions were placed for the following:—"Healthy Motherhood" (50,000 copies), "Diabetes" (15,000 copies) and "Poliomyelitis" (a further 20,000 copies).

The following posters, stickers and cards were printed:—

Title.	Number of Copies
"Dangerous Weapons" (24-sheeter)	250
"Dangerous Weapons" (single-sheet, 21 in. x 14 in.)...	1,000
Foodhandling Series, 13 in. x 10 in.—	
"Keep these Cold"	1,000
"Keep these Under Cover"	1,000
"Use a fork—don't be a butterfinger"	1,000
"Handle with Care"	1,000
"Wash Your Hands Often"	1,000
"Wash Every Piece Carefully"	1,000
Bulkhead cards on foodhandling for tram display ...	3,680
Side rack cards on foodhandling for tram display	2,000
"Sensible Living Helps Prevent T.B." (reprint)	4,000

Visual (Film) Education.

As will be seen from the following, the Department had another successful year in the use of films for educational purposes—

- (1) *Film Screenings*.—Altogether, 193 separate programmes were screened to a total audience of 65,539, made up as follows:
16mm. 178 programmes 49,589 people.
35mm. 15 programmes 15,950 people.

65,539
- (2) *Film Loans*.—During the year 280 sixteen millimetre, and 98 thirty-five millimetre films were loaned to approved borrowers. Unfortunately, a record of audience figures was not maintained; such a record will be kept from 1951 onwards. A conservative estimate of the number of people who viewed loan films would be 30,000.
- (3) *35mm. Films Produced and Released*.—Two new 35mm. films were completed during the year, viz., "Disturber of the Peace" (noise) and "Poison Unlimited" (food handling). Prints of another 35mm. film, "Pardon Me" (use of handkerchief when coughing) were acquired.

The Department continued to take advantage of its agreement with the Motion Picture Industry for the free release of 35mm. films throughout the State. The release of "Public Enemy No. 1" (commenced last year) was completed, as were the releases of "Poison Unlimited" and "My Fight For Life" (T.B.).

- (4) *New Films*.—Forty-nine additional 16mm. films (including twenty-four separate titles) and sixty-three 35mm. films (comprising three different titles) were acquired. The state of the Department's film libraries was as follows at 31st December, 1950—

16mm.—209 films (149 separate titles, fifty of which are available for free loan).

35mm.—226 films (thirty-one separate titles, all available for loan).
- (5) *New Film Equipment*.—Two new projectors were acquired, making a total of four in the service of the Department. After many years, the Department has at last secured permanent accommodation in the building for preview purposes. A new film splicer, and other minor equipment was acquired.

C. NUTRITION.

REPORT ON THE ACTIVITIES OF THE NUTRITION SECTION FOR THE YEAR ENDED 31st DECEMBER, 1950.

Staff.

Dietitians—Three.

Shorthand-typiste—One.

Miss June Harding was appointed to the staff and commenced duty 4th February, 1950.

Nutrition Education.

(a) *Publicity Material*.—Articles and radio scripts (400 to 500 words) are prepared every week for metropolitan and country newspapers and radio stations. Articles are sent to 397 newspapers. A weekly marketing bulletin on fruit and vegetable prices is supplied to all metropolitan commercial radio stations.

Special articles dealing with food values and items of particular interest have been prepared on request for newspapers and periodicals.

Special radio scripts dealing with relative food values and prices were prepared and broadcast at various times from stations 2GB and 2UE.

A new radio series, "Nutrition Question Box" was begun in the form of a question and answer broadcast each week in the 2GB Women's Session.

Revised leaflets, "Money Saving Main Dishes" and "Salad Suggestions" were revised and re-issued.

The "Sally Stringbag" feature continued until the "Home Magazine" ceased publication.

Assistance was given in setting up and staffing exhibits arranged by the Division of Maternal and Baby Welfare and the Diabetic Association at the Annual Health Week Exhibition at the Town Hall. Assistance was given with the organisation of the Health Week Luncheon.

(b) *Enquiries*.—Large numbers of enquiries dealing with food values, relative values and costs, and methods of cooking are dealt with by telephone, letter and interview.

Detailed individual diets are supplied to enquirers prescribed special diets by their own physicians.

(c) *Lectures*.—Talks on nutrition and food values, costs, children's meals are given to various groups such as Parents and Citizens' Associations, Mothers' Clubs, Church groups and Junior Farmers' Clubs. Talks and practical demonstrations are given at the Annual Conference of the Agricultural Bureau at Hawkesbury College and to branches of the Bureau in country districts.

Series of lectures are given to trainee teachers at the Sydney Kindergarten Training College and the Sydney Day Nursery and Nursery Schools' Association and to members of Voluntary Aid Detachments.

Talks and demonstrations were given at two St. George County Council Demonstration Kitchens in connection with Health Week. Talks were given to various groups in Newcastle during the Newcastle Health Week.

(d) *Pre-natal Clinics*.—Regular weekly attendance at Parramatta, Manly and Hurstville Clinics was maintained and Liverpool, Campsie, Dee Why and Hornsby Clinics were also attended each week. Advice on normal and special diets is given under the direction of the Medical Officer. The diet instruction sheets have been translated into various languages (Estonian, Polish, German, Lithuanian, Czechish, Latvian, Serbian) to assist New Australians attending the clinics.

Institution Food Services.

A dietitian gave part-time assistance to the Randwick Auxiliary Hospital until the end of March when a full-time catering officer was appointed to the Hospital.

The food service at Waterfall Sanatorium was inspected with the Supervisor of Catering and a report prepared.

In co-operation with the Supervisor of Catering revised sketch plans for the renovation of the kitchen at Parramatta Mental Hospital were examined and reported on and advice given regarding food service at that hospital.

Other Activities.

New South Wales State Nutrition Committee.—The executive and secretarial work of this Committee has been done.

School (Oslo) Lunch Advisory Committee.—A dietitian has acted as representative of the Health Department on this Committee; advice and talks have been given to groups preparing to organise canteens in schools.

New South Wales Institute of Dietitians.—The executive and secretarial work of this body has been done within the section.

Liaison with other Government Departments.—Advice and information on specific dietary problems and planning menus for homes and holiday camps has been given to the Child Welfare Department and the Aborigines Welfare Board.

In collaboration with Dr. Cuthbert, menus and recipes for feeding children in Migrant Camps were prepared for the Department of Labour and National Service and checked in the test kitchen in Melbourne.

Assistance was given to the Commonwealth Office of Education in the preparation of posters for discussion groups and for the education of New Australians.

Committee to Fix Standards for Evaluating Bread.—A dietitian acted as representative of the Health Department on this Committee set up by the Minister for Labour and Industry and Social Welfare.

Broken Hill.—A dietitian spent a period in Broken Hill and the North West corner of New South Wales enquiring into food supplies and problems in that area and a report was prepared.

Trainee Dietitians.—The work of the trainee dietitians is supervised during University vacations.

D. DIVISION OF MATERNAL AND BABY WELFARE.

PART I—MATERNAL WELFARE.

Scheme for the Reduction of Maternal Mortality.

Pre-natal clinics.—Ten clinics are now conducted at baby health centres in the metropolitan area. Their distribution is planned to provide services on all lines of transport, viz., Liverpool and Parramatta on the west, Campsie on the Banks-town line, Beverley Hills on the East Hills line, Hurstville on the south, Hornsby on the North Shore line, Manly, Harbord and Dee Why on the north-east, and Mascot in the south-east area.

The total attendances for the year 1950 were 17,771, an increase of 6,048 on the previous year. Four medical officers of this Division undertake the medical supervision at these clinics.

Careful check is maintained on the attendances to observe average maximum caseload, thirty-five per morning and thirty per afternoon. This caseload allows the medical officer and the two sisters to handle the work adequately without unnecessary stresses for the mothers or the staff.

If accommodation enables mothercraft work to be carried out at the same time as the pre-natal clinic, an additional allocation is made to the nursing staff for this purpose.

The mothers attending the pre-natal clinics are all booked at the public obstetric hospitals. A close liaison is observed with the out-patient departments and each mother has a thoracic X-ray and a blood examination for the Rhesus factor, Wassermann reaction, blood group and blood count.

Attendances at Manly and Dee Why and Parramatta continue to be heavy, warranting two sessions weekly or a specially adjusted service. At Beverley Hills, Harbord and Mascot the attendances are small: the remainder of the clinics continue to increase.

Many New Australian mothers attend the clinics, the highest proportion being at Campsie, Parramatta and Mascot. Many of these mothers attend before booking at a hospital. It is therefore necessary for the medical officers to assist in the arrangements for their hospital booking.

These factors add considerably to the work of the clinics and the language difficulty makes the work more exacting for the medical officers, the sisters and the dietitians.

The three dietitians from the Nutrition Division regularly visit eight of the pre-natal clinics. Arrangements are made for mothers from the two smallest to attend the nearest clinic for this advice. There is close co-operation between the medical officers and the dietitians, with the important objective of ensuring that every expectant mother fully understands the necessity for following the advice given concerning a balanced diet with adequate vitamins and basic protective proteins. The mother is instructed in the relationship of adequate diet to the control of complications of pregnancy and the survival of her baby.

Translations of the general and special instructions concerning nutrition are available in seven languages. This reduces the difficulties for both the mothers and the staff of the clinics and ensures that the New Australian mother not yet acquainted with the language can receive the same preventive care as mothers who readily understand and speak English.

It is considered that this nutritional instruction is one of the most important factors in the control of the complication known as toxæmia of pregnancy which, if unchecked, may cause the death of the mother and her baby. It would also appear from our experience with early nutritional instruction, that the onset of any signs or symptoms of toxæmia is prevented in many instances, and actually a decline in cases of early toxæmia is noticed.

The co-operation of the public maternity hospitals is greatly appreciated by the Department, as this service enables the continuity of pre-natal care to be effective. At the same time the expectant mother is safeguarded against the fatigue and expense of travelling for all medical supervision to the hospital where she is booked. This is particularly important for mothers suffering from toxæmia, as it may be essential that she attends for supervision as often as each week: this would be impracticable, for instance, for a mother with two other children living at Liverpool, and would possibly lead to the non co-operation of the mother, with disastrous results.

The departmental officers would like to express their appreciation of the interest and courtesy extended to them by the medical superintendents of the public maternity hospitals.

Special medical committee investigating maternal mortality.—The special medical committee investigating maternal mortality in the metropolitan area includes the Director-General of Public Health, the Emeritus Professor and the Professor of Obstetrics at the University of Sydney, the senior Honorary Medical Officers of the Royal Hospital for Women and the Women's Hospital, Crown-street, a general practitioner appointed by the N.S.W. Branch of the British Medical Association and the Director of Maternal and Baby Welfare; the latter is the medical secretary of the Committee.

The co-operation of the medical superintendents of the metropolitan obstetric hospitals and medical practitioners in private practice has been greatly appreciated by the Committee. Questionnaires to furnish a detailed and accurate case history, are sent to consultants, to medical practitioners, and to the public obstetric hospitals shortly after the notification of each maternal death. Thus, with the complete history of the case, the Committee endeavours to assess as accurately as possible the avoidable factors, if any, and the responsibility for same in each maternal death.

Free Consultant Service.—Since the scheme came into operation in 1939 the services of obstetric consultants who have agreed to receive a reduced fee from the Department, have been available for all patients who are unable to meet a specialist's fee, during pregnancy, as well as during the time of confinement.

The consultant service is, however, not frequently used because fewer mothers are confined in their own home, and those in the obstetric hospitals are provided with a specialist service when necessary. There were five cases in which it was made use of during the year.

Metropolitan Blood Transfusion Service.—The decrease in maternal deaths from hæmorrhage is largely due to the mobile blood transfusion service, as it is considered that with each transfusion given at the bedside of a patient, a life is saved.

This service is available to any medical practitioner at any hour of the day or night. The original unit (1939) was stationed at the Women's Hospital, Crown-street. During 1945 other units were established at Royal Prince Alfred Hospital, North Shore Hospital, and the Royal Hospital for Women, Paddington. This year an additional unit was established at St. George Hospital, Kogarah. Transfusions from these units were given on twenty-eight occasions during the year.

During the year under review still another safeguard of maternal life came into operation with the introduction of arrangement whereby serum held by certain hospitals in the metropolitan area is made available on demand. This enables an immediate intravenous injection to be commenced, pending the arrival of the Mobile Blood Transfusion Unit, thus minimising the effects of shock due to loss of blood. Twenty-one hospitals agreed to co-operate in this scheme.

Physiotherapy in pregnancy and the puerperium.—Under the supervision of qualified physiotherapists pre-natal and post-natal exercises are a routine at the Royal Hospital for Women; and post-natal exercises are routine procedure at the Women's Hospital, Royal North Shore and King George V and Ryde District Hospitals. Medical officers at the Departmental clinics have observed that mothers who have attended these hospitals have received considerable benefit from these exercises. Moreover, their abdominal muscles usually regain normal tone and their posture is resumed correctly. Post-natal examinations reveal that the mothers who have had post-natal exercises less frequently develop gynaecological abnormalities, such as retroversion, cystocele, rectocele, and the like.

At the metropolitan obstetric hospitals where this procedure has been instituted, medical and nursing staff report that the mothers express their appreciation of the sense of well-being which the exercises produce and of the regaining of their normal figure.

The New South Wales Branch of the Australian Physiotherapy Association conducts the training in this subject at the physiotherapy centre at the Royal Hospital for Women; the instructor is Mrs. Nancy Leigh. The Director of Maternal and Baby Welfare is a member of the Council and acts as adviser on this subject.

The Departmental sound film in black and white, "Physiotherapy in Pregnancy and the Puerperium" continues to be used for the teaching of medical and physiotherapy students and for the training of nurses. Copies are used for training physiotherapy students in other States.

Control of Puerperal Infection.—To protect mothers after the birth of their babies, from cross infection, which might prove fatal, every effort is made by this Department to prevent the spread of puerperal sepsis. Control is effected by the administration of the Nurses Registration Act, which makes it compulsory for all obstetric nurses to notify any case of puerperal pyrexia occurring in their practice, which prohibits a nurse from attending any other case while attending a patient with puerperal infection, and which examines her methods in the management of her cases; also by the Public Health Act, under which puerperal infection is a notifiable disease, and by the Private Hospitals' Act.

The Regulations of the various acts are designed to prevent the occurrence of puerperal sepsis, particularly those for nurses relating to the wearing of masks, the management of the case, etc. Each case of infection occurring is investigated by bacteriological examination. Further action is determined by those results, the dual object being to protect midwifery patients from further possibility of infection and to avoid any delay or difficulty in nursing and medical supervision.

During 1950 fourteen cases were notified to the local authorities. Of these, six were due to abortal sepsis (all in the metropolitan area) and eight following confinement (three in the city and five in the country).

The distribution of these cases was:

Private hospitals: Abortal sepsis, nil; sepsis following confinement, two. Public hospitals: Abortal sepsis, six; sepsis following confinement, six.

Under the Nurses' Registration Act, ninety cases of pyrexia were notified during 1950 (fifteen in the city and seventy-five in the country).

Vital Statistics.

The live birth rate for New South Wales for 1950 was 22.20 per 1,000 mean population. The number of live births was 71,592 and of still births 1,406, a total of 72,998. See Table I.

Table I reveals the increase in the number of births and the birth rate for the whole State and the continuing higher proportion of both in "the remainder of the State" to the number and the rate in Sydney. The birth rate per 1,000 live births for New South Wales was 18.87; the number of live births and still deaths was 72,998.

TABLE I.
Live Births and Still Births—New South Wales.

Year.	Total Births.	Live Births.		Still Births.	
		Number.	Rate per 1,000 of population.	Number.	Per 1,000 total births, live and still
STATE OF NEW SOUTH WALES.					
1936	47,612	46,193	17.31	1,419	29.80
1937	48,949	47,497	17.62	1,452	29.66
1938	48,792	47,319	17.38	1,473	30.19
1939	49,363	48,003	17.45	1,360	27.55
1940	50,724	49,382	17.78	1,342	26.46
1941	53,193	51,729	18.47	1,464	27.52
1942	54,058	52,647	18.60	1,411	26.10
1943	58,730	57,265	20.04	1,465	24.94
1944	61,123	59,612	20.65	1,511	24.72
1945	63,202	61,202	21.14	1,540	24.37
1946	68,794	67,247	22.83	1,547	22.49
1947	70,864	69,398	23.25	1,466	20.69
1948	68,560	67,234	22.19	1,326	19.35
1949	70,091	68,812	22.10	1,279	18.25
1950	72,998	71,592	22.20	1,406	19.26
METROPOLITAN AREA (Statistical Metropolis).					
1936	18,341	17,759	14.23	582	31.73
1937	18,748	18,158	14.48	590	31.47
1938	19,150	18,559	14.73	591	30.86
1939	19,885	19,223	15.24	562	28.26
1940	20,515	19,942	15.53	573	27.93
1941	23,019	22,366	17.05	653	28.37
1942	23,848	23,220	17.26	628	26.33
1943	27,700	26,989	19.52	711	25.67
1944	29,014	28,318	19.96	696	24.58
1945	30,230	29,501	20.42	729	24.12
1946	32,467	31,769	21.68	698	21.50
1947	32,536	31,918	21.51	618	18.99
1948	30,605	30,047	20.01	558	18.23
1949	30,466	29,936	19.56	530	17.40
1950	30,213	29,643	18.92	570	18.87
REMAINDER OF STATE.					
1936	29,271	28,434	20.02	837	28.59
1937	30,201	29,339	20.36	862	28.54
1938	29,642	28,760	19.66	882	29.76
1939	29,478	28,680	19.35	798	27.07
1940	30,209	29,440	19.70	769	25.46
1941	30,174	29,363	19.72	811	26.88
1942	30,210	29,427	19.81	783	25.92
1943	31,030	30,276	20.53	754	24.30
1944	32,109	31,294	21.32	815	25.38
1945	32,972	32,161	21.83	811	24.60
1946	36,327	35,478	23.98	849	23.37
1947	38,328	37,480	24.97	848	22.12
1948	37,955	37,187	24.34	768	20.23
1949	39,625	38,876	24.55	749	18.90
1950	42,785	41,949	26.13	836	19.54

TABLE II.
Live Births and Maternal Mortality in New South Wales.
Comparative figures for the whole State, the Metropolitan Area and Remainder of State.

Live Births.				Deaths from Puerperal Causes (excluding Criminal Abortion).			Maternal Mortality Rate per 1,000 Live Births (excluding Criminal Abortion).		
Year.	State.	Met.	Rem.	State.	Met.	Rem.	State.	Met.	Rem.
1936	46,193	17,759	28,434	236	103	133	5.11	5.80	4.68
1937	47,497	18,158	29,339	198	83	115	4.17	4.57	3.92
1938	47,319	18,559	28,760	181	72	109	3.82	3.88	3.79
1939	48,003	19,323	28,680	162	59	103	3.38	3.05	3.59
1940	49,382	19,942	29,440	175	59	116	3.54	2.96	3.94
1941	51,729	22,336	29,363	177	67	110	3.42	2.99	3.74
1942	52,647	23,220	29,427	172	61	111	3.27	2.62	3.77
1943	57,265	26,989	30,276	169	66	103	2.95	2.45	3.40
1944	59,612	28,318	31,294	155	74	81	2.60	2.61	2.59
1945	61,662	29,501	32,161	122	46	76	1.97	1.56	2.36
1946	67,247	31,769	35,478	100	33	67	1.49	1.03	1.89
1947	69,398	31,918	37,480	112	38	74	1.61	1.19	1.97
1948	67,234	30,047	37,187	81	30	51	1.20	1.33	1.37
1949	68,812	29,936	38,876	84	27	57	1.22	.90	1.47
1950	71,592	29,643	41,949	70	18	52	.98	.61	1.24

Total Puerperal Deaths include Acute Yellow Atrophy of the Liver from 1940 onwards.

TABLE III.
Causes of Maternal Mortality, 1950.

Causes of Death.	New South Wales.		Statistical Metropolis.		Remainder of State.	
	Number.	Rate per 1,000 Live Births.	Number.	Rate per 1,000 Live Births.	Number.	Rate per 1,000 Live Births.
Toxaemias of pregnancy	17	0·24	4	0·14	13	0·31
Ectopic pregnancy	6	0·08	1	0·03	5	0·12
Other complications of pregnancy	5	0·07	2	0·07	3	0·07
Abortion (including criminal)	4	0·06	1	0·03	3	0·07
Delivery with specified complication	26	0·36	7	0·24	19	0·46
Puerperal urinary infection without other sepsis.....	...	...	...	...	...	...
Sepsis of childbirth and the puerperium	2	0·03	1	0·03	1	0·02
Puerperal phlebitis and thrombosis	3	0·04	...	...	3	0·07
Puerperal pulmonary embolism	3	0·04	...	...	3	0·07
Other and unspecified complications of the puerperium	4	0·06	2	0·07	2	0·05
Total, excluding criminal abortion.....	70	0·98	18	0·61	52	1·24
Criminal abortion	10	0·14	6	0·20	4	0·09
Total	80	1·12	24	0·81	56	1·33

The maternal mortality rate including criminal abortion for 1950 in New South Wales is the lowest on record: the rate for Sydney is .81 and for the remainder of State 1.33. Excluding criminal abortion the rates for the State, for Sydney and for the remainder of State are as follows: .98, .61, 1.24 respectively, per 1,000 live births. See Table II.

In the sixth revision (1948) of the Interuational List of Causes of Death fundamental changes have taken place, so that strict comparison of the analysed figures is not possible.

The sixth revision (see Table III) indicates that of the eighty maternal deaths in the State seventeen died of toxæmia of pregnancy. This is the major single cause of death and it will be noted that four of these mothers died in Sydney while thirteen died in the remainder of State. These deaths are now, with very few exceptions, regarded as preventable. It is regrettable that so many mothers lost their lives from a condition which can be prevented and controlled by effective antenatal care. The large proportion of deaths occurring outside Sydney indicates the grave need for better antenatal care in country districts and in many instances better co-operation between the mother and her relatives.

The other major cause of loss of lives of mothers in this State is that classified as "Delivery with specified complications", which was responsible for twenty-six of the total of eighty deaths.

In this group also the loss was less in the metropolitan area (i.e. 7) than in the remainder of the State where there were nineteen.

A much higher death rate from ectopic gestation is also found outside the metropolitan area—.12 as compared with .08. This also points to lack of diagnostic skill or to lack of facilities.

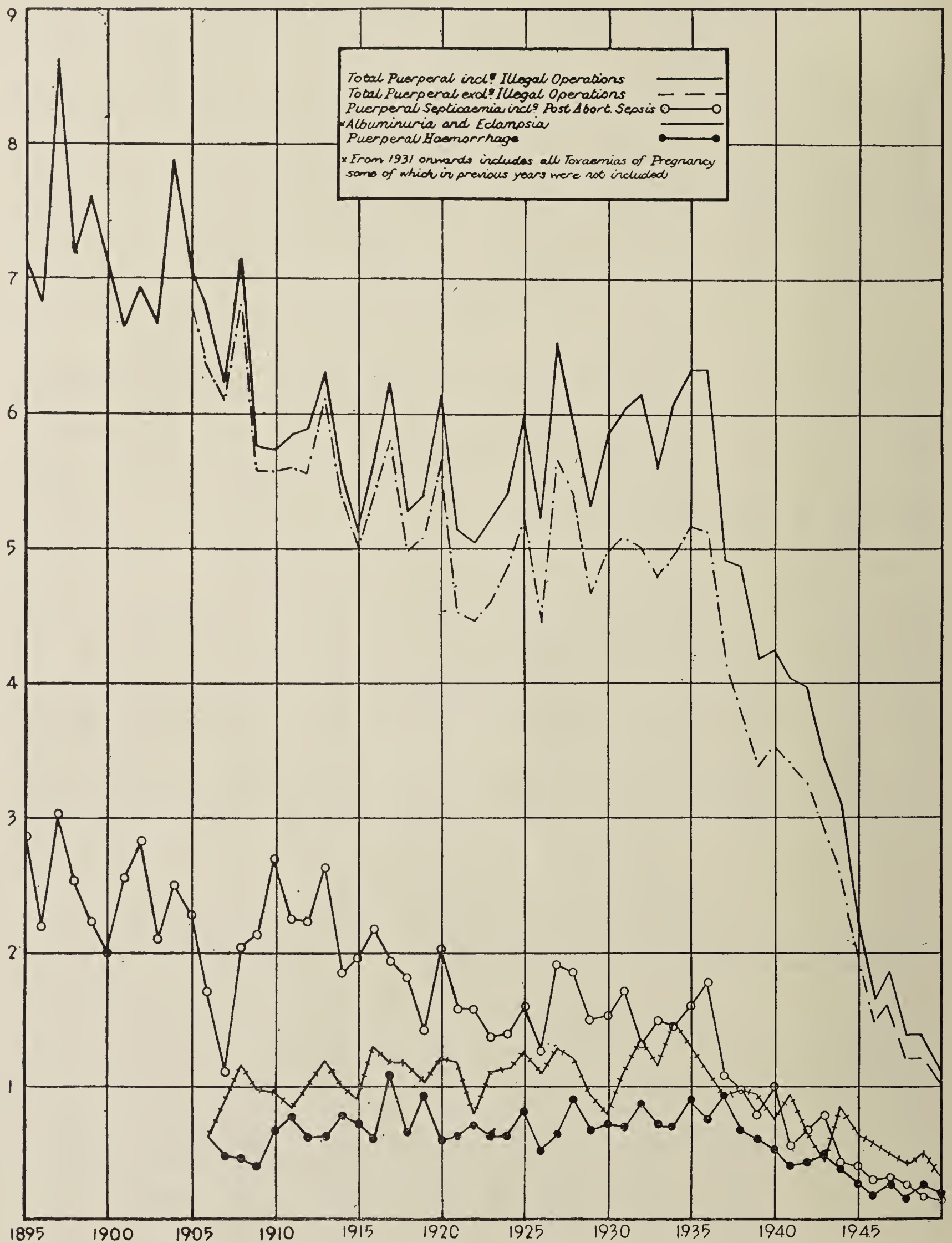
These facts and examination of Table III leaves no room for any possible doubt that the services available in Sydney for many years under the scheme referred to earlier should be extended to the whole State.

From the above facts it will be seen that there is no reason for complacency in the mortality rate in this State. It appears that some of these seventeen mothers may have lost their lives unnecessarily and possibly other deaths were preventable.

TABLE IV. Deaths from Criminal Abortions in New South Wales. Metropolitan Area, Remainder of State and Whole State.									
Year.	Deaths from Criminal Abortion only.				Total Puerperal Deaths (including Criminal Abortion).				
	Female deaths at all ages.		Female deaths at ages 15-44 years.		Female deaths at all ages.		Female deaths at ages 15-44 years.		
	No.	per cent.	No.	per cent.	No.	per cent.	No.	per cent.	
NEW SOUTH WALES.									
1936	56	0·52	56	3·30	292	2·71	288	16·97	
1937	35	0·32	35	2·22	233	2·14	233	14·75	
1938	50	0·44	50	3·09	231	2·03	228	14·07	
1939	38	0·32	38	2·53	200	1·71	199	13·24	
1940	34	0·30	34	2·54	209	1·86	208	15·52	
1941	32	0·26	32	2·22	209	1·73	207	14·35	
1942	37	0·29	37	2·60	209	1·64	208	14·63	
1943	27	0·21	27	1·93	196	1·52	195	13·92	
1944	31	0·25	31	2·30	186	1·53	185	13·70	
1945	17	0·14	16	1·26	139	1·14	137	10·80	
1946	11	0·09	11	0·93	111	0·89	110	9·30	
1947	18	0·14	18	1·59	130	1·05	120	11·38	
1948	11	0·08	11	0·99	92	0·69	92	8·24	
1949	10	0·08	10	0·95	94	0·74	94	8·94	
1950	10	0·07	10	0·91	80	0·60	79	7·22	
METROPOLITAN AREA (Statistical Metropolis).									
1936	29	0·50	29	3·34	132	2·27	130	14·96	
1937	17	0·28	17	2·04	100	1·67	100	12·02	
1938	36	0·57	36	4·13	108	1·71	106	12·16	
1939	30	0·47	30	3·75	89	1·38	89	11·14	
1940	22	0·35	22	3·17	81	1·23	81	11·69	
1941	21	0·31	21	2·83	88	1·30	88	11·84	
1942	25	0·35	25	3·56	86	1·21	85	12·11	
1943	17	0·24	17	2·45	83	1·15	83	11·98	
1944	18	0·26	18	2·45	92	1·35	91	12·38	
1945	14	0·20	13	1·97	60	0·87	59	8·95	
1946	5	0·07	5	0·78	38	0·53	37	5·80	
1947	9	0·13	9	1·41	47	0·66	46	7·69	
1948	10	0·13	10	1·71	40	0·52	40	6·85	
1949	9	0·12	9	1·67	36	0·49	36	6·67	
1950	6	0·08	6	1·14	24	0·32	24	4·56	
REMAINDER OF STATE.									
1936	27	0·55	27	3·26	160	3·24	158	19·08	
1937	18	0·37	18	2·41	133	2·72	133	17·78	
1938	14	0·28	14	1·87	123	2·44	122	16·31	
1939	8	0·15	8	1·14	111	2·11	110	15·62	
1940	12	0·24	12	1·85	128	2·58	127	19·63	
1941	11	0·21	11	1·57	121	2·57	119	17·00	
1942	12	0·21	12	1·67	123	2·18	123	17·08	
1943	10	0·18	10	1·41	113	1·98	112	15·82	
1944	13	0·24	13	2·11	94	1·76	94	15·28	
1945	3	0·06	3	0·49	79	1·49	78	12·81	
1946	6	0·11	6	1·10	73	1·34	73	13·39	
1947	9	0·17	9	1·68	83	1·56	83	15·49	
1948	1	0·01	1	0·19	52	0·91	52	9·77	
1949	1	0·02	1	0·20	58	1·03	58	11·35	
1950	4	0·07	4	0·70	56	0·95	55	9·68	

GRAPH II.

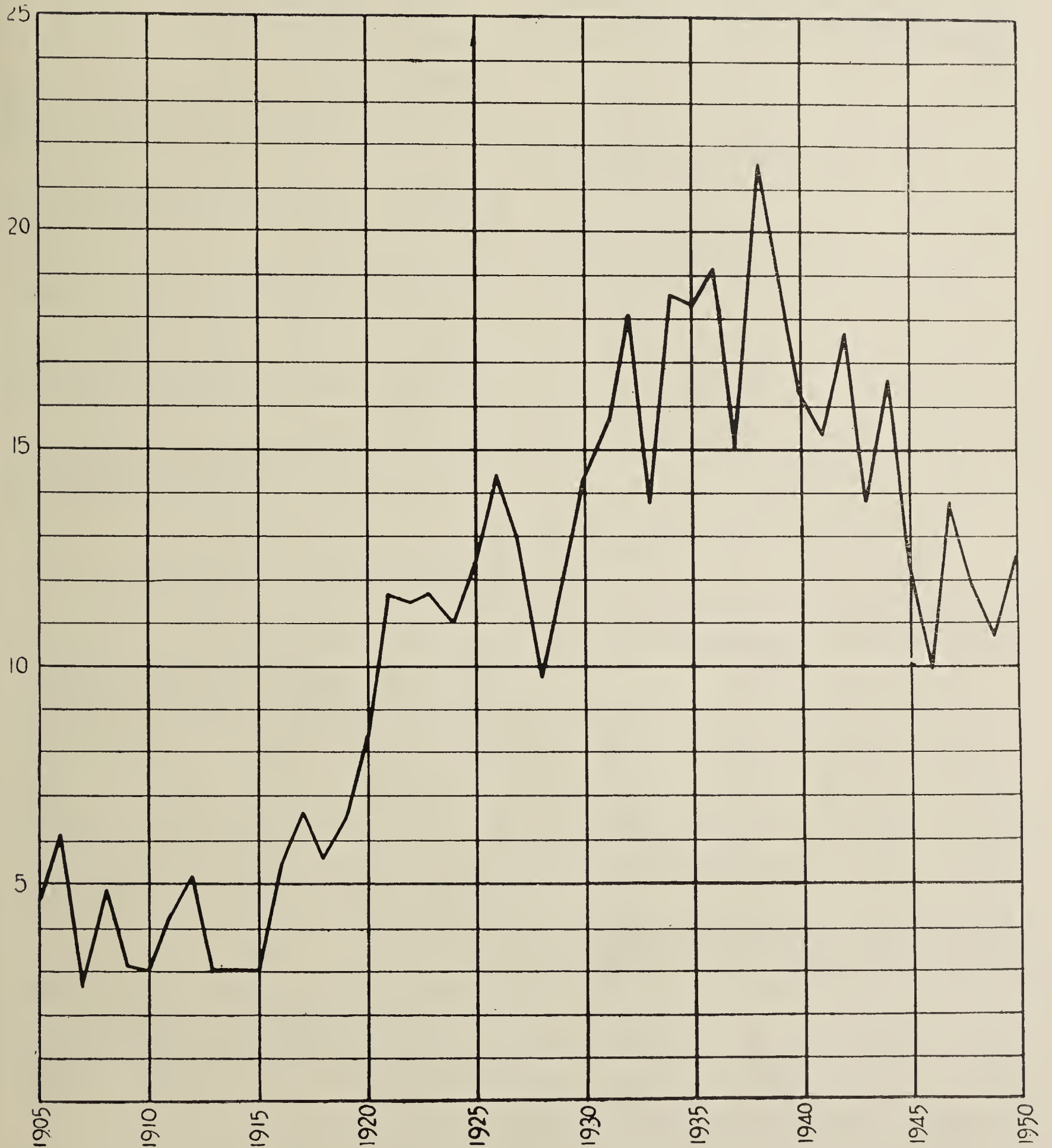
Deaths due to Puerperal Condition, New South Wales—Death Rates from Certain Causes per 1,000 Live Births for the years 1895–1950.



From 1950 all death rates are compiled according to the VIth International classification.

GRAPH 12.

Maternal Mortality—Deaths from Criminal Abortions as percentage of total Maternal Deaths in New South Wales, 1905–1950.



From 1950 all death rates are compiled according to the VIth International classification.

PART II—INFANT WELFARE.

Baby Health Centres.

In 1944 the department implemented the policy of the Government to give generous financial assistance in the establishment of new baby health centre premises and since that date the development of this most important field of maternal and baby welfare has progressed considerably.

The policy provided that, where in future any local organisation of approved status is prepared to co-operate in the establishment of a baby health centre for use either in substitution of existing unsatisfactory premises or as a fresh or additional centre:—

- (a) The Government makes a grant of 50 per cent. of the capital cost of building and equipping the centre (exclusive of the cost of the site) and, if required, advances up to a further 25 per cent. of these costs, subject to repayment of the loan by equated payments of principal and interest over a period of ten years.
- (b) If it is not possible to erect a new building but it is possible to purchase or rent suitable premises, the Government contributes 50 per cent. of the cost of the building exclusive of the site, or alternatively, 25 per cent. of the rent payable.
- (c) In addition to any commitments involved in (a) of above, the local organisation will be required to maintain premises in good order and repair and be responsible for all maintenance upkeep such as cleaning, light and fuel, telephone charges, replacement of equipment and like service, and undertake to make the premises available at all times to the Department of Public Health for use as a baby health centre free of rent.
- (d) The Government undertakes to provide also, free of cost, the necessary staff for the centre and be responsible for any travelling and sustenance expenses of the members of such staff in accordance with the Public Service Regulations.
- (e) The arrangement will also be subject in all cases to the local organisation obtaining the approval of this department as to location, plans and equipment of the centre, and to the organisation further undertaking not to interfere in any way with the conduct of the activities of the centre.

If the application for Government assistance is made, it is necessary for the council or committee to complete a resolution embodying the conditions under which such grant is accepted.

Official standard lists of equipment are used as a basis of discussion and planning, and all purchases of equipment are made through ordinary commercial channels.

Payment of subsidy is made on production of receipts for all purchases which are in accordance with the list previously submitted and approved.

While observing the standard requirements for adequate and proper relationships of rooms for the most efficient working conditions, external appearances of general design have varied widely. The combination of domestic and institutional architecture has been the objective.

There are now 278 baby health centres in the State, of which seventy-six are in the metropolitan area, eleven in Newcastle and 191 in the country.

There were eleven new buildings completed and occupied under the new policy during the year, viz., Arian Park, Ballina, Campbelltown, Dorrigo, Eden, Grafton South, Kempsey, Stockingbingal, St. Mary's, Toronto and Wagga South.

In addition a centre was opened in temporary premises at Yeoval with nursing staff and 50 per cent. of the equipment provided by this department, and a new baby health centre building was erected at Macksville by the C.W.A. for which subsidy was not claimed.

This assistance by the Government has now been increased to provide a subsidy of 75 per cent., or a rental refund of 37½ per cent., for cases in which formal acceptance of an earlier offer of 50 per cent. had not actually been completed by May, 1950.

The rental subsidy payable for new projects has been increased to 37½ per cent.

The baby health centre staff consists of three nurse inspectors, 126 sisters-in-charge, forty-six sisters, and various part-time officers whose services aggregate ten full-time sisters.

The attendances for the year were:—

Individual attendances—107,205.

Total attendances—1,072,174.

Staff Lectures.—Routine staff lectures are given each year at least once a quarter.

Departmental Booklets.—The departmental free booklet "Healthy Motherhood", of which 50,000 are printed annually, continues to be a most valuable publication and is used by all the metropolitan and country obstetric hospitals, the majority of obstetric specialists and general practitioners.

Its chief aim is to raise the standard of pre-natal care by encouraging the mother to co-operate with her doctor, hospital or clinic by following implicitly the instructions given, by attending regularly, and by paying particular attention to diet during pregnancy.

In addition to this valuable instruction in pre-natal care, "Our Babies" is another free booklet from the department of which 50,000 are printed annually.

Services for the Pre-school Child.—The general interest of the community in recent years has been awakened to the needs of the pre-school child and there has been a marked demand from all sections of the community for increased facilities for this age group.

The baby health centres always encouraged mothers to bring their toddlers and pre-school children to the centres for routine supervision, as the years from 0 to 5 are those in which the foundation is laid for the child's future health. These are the "vulnerable" years; the most formative period and the one of most rapid growth.

The baby health centres give the parent of pre-school children instruction in simple dietetics and elementary hygiene, as well as checking the weight and physical development of the child.

Unfortunately, owing to serious shortage of staff, it has been found necessary, in order to continue to staff all baby health centres in the city and the country, and provide advice and supervision so essential for the mothers of young infants, to discontinue temporarily in the metropolitan area the practice of seeing children aged from 2 to 5 years as a matter of routine. Advice is, however, given in any case when especially needed.

A medical officer makes regular visits to five baby health centres in the metropolitan area at fortnightly intervals, and advises on cases selected by the sister from the babies brought to the centre who are not attended by a private doctor.

The cases so selected are those concerning whom there are difficulties which cannot be dealt with by the sisters themselves.

Acutely ill babies, or those with infectious diseases, are not seen.

During 1950, 534 babies were seen by the medical officer.

The centres where the medical service is located were chosen in the light of their accessibility to the surrounding areas, so that cases could be referred by sisters at adjacent baby health centres without causing the mothers undue hardship in travelling.

Vital Statistics.

Infant Mortality.—In 1950, 1,936 infants died during the first year of life, representing a mortality rate per 1,000 live births of 27.04. The city of Sydney had a rate of 25.44 and the remainder of State 28.18.

The loss of infant life throughout the first six months of life was lower in Sydney than in the remainder of the State. This was particularly marked in the two periods, second to fourth week, inclusive, and the third to the sixth month, inclusive.

From six to twelve months, however, the loss of life was greater in Sydney than in the remainder of the State—3.44 and 3.41 respectively.

TABLE V.
New South Wales.
Infantile Mortality Rate per 1,000 Live Births.
Continuous Five-yearly Average.

<i>Period.</i>	<i>Rate.</i>	<i>Period.</i>	<i>Rate.</i>
1937-1941.....	41.29	1942-1946.....	33.30
1938-1942.....	41.18	1943-1947.....	31.38
1939-1943.....	39.95	1944-1948.....	30.31
1940-1944.....	37.72	1945-1949.....	29.62
1941-1945.....	35.95	1946-1950.....	28.91

The above table indicates the continuous reduction of the infant mortality rates in the State. This rate has remained thirty and under per 1,000 live births since 1944; 27.04, the rate for 1950, is the lowest on record.

Table VI hereunder indicates that in the mortality from respiratory diseases the loss was higher in the remainder of the State, being 139, while in Sydney there were seventy-seven deaths.

Congenital malformations and certain diseases peculiar to infancy were responsible in New South Wales for a mortality rate of 20.13 out of the total 27.04 per 1,000 live births. Surely this is an arresting proportion, and as it is analysed, becomes more significant.

The mortality rate for prematurity was 6.75 and for birth injury 3.43; together they accounted for half the deaths in this group. In comparing the figures for these two causes for Sydney and the remainder of the State, they were, respectively, prematurity 5.50 and 7.63, birth injury 3.64 and 3.45. In each instance the death rate was lower in Sydney.

Congenital abnormalities of the circulatory system and ill-defined diseases peculiar to infancy accounted for 1.30 and 1.54 for New South Wales, respectively.

The grave problems arising out of prematurity are well demonstrated. This can be further emphasised by pointing out that of the 1,345 infants dying in the first four weeks of life (neonatal) 706 or 52.5 per cent. were born prematurely.

TABLE VI.
Infantile Mortality of Children under one year of age classified according to the International List of Causes of Death.*
Rate per 1,000 Live Births.

<i>Class.</i>		<i>New South Wales.</i>	<i>Statistical Metropolis.</i>	<i>Remainder of State.</i>
1	Infective and Parasitic Diseases ...	0.54	0.71	0.43
2	Neoplasms	0.14	0.20	0.10
3	Allergic, Endocrine System, Metabolic and Nutritional Diseases.	0.29	0.20	0.36
4	Diseases of the Blood and Blood Forming Organs.	0.03	0.07	...
5	Mental, Psychoneurotic and Personality Disorders.	0.03	0.03	0.02
6	Disorders of the Nervous System and Sense Organs.	0.94	1.05	0.86
7	Diseases of the Circulatory System...	0.01	0.03	...
8	Diseases of the Respiratory System	2.11	1.62	2.45
9	Diseases of the Digestive System ...	1.73	1.55	1.86
10	Diseases of the Genito-Urinary System.	0.04	0.03	0.05
11	Deliveries and Complications of Pregnancy, Childbirth and the Puerperium.	...	...	...
12	Diseases of the Skin and Cellular Tissue.	0.06	0.07	0.05
13	Diseases of the Bones and Organs of Movement.	0.03	0.07	...
14	Congenital Malformations	3.49	3.48	3.50
15	Certain Diseases of Early Infancy...	16.64	15.48	17.45
16	Symptoms, Senility and Ill-defined Conditions.	0.25	0.24	0.26
17	Accidents, Poisonings and Violence...	0.71	0.61	0.79
Total, All Causes		27.04	25.44	28.18

* Sixth Revision (1948).

TABLE VII.
New South Wales—Infantile Mortality According to Age.
Rate of Mortality per 1,000 Live Births.

<i>Year.</i>	<i>Under 1 week.</i>	<i>1 week and under 1 month.</i>	<i>Total under 1 month.</i>	<i>1 month and under 3 months.</i>	<i>Total under 3 months.</i>	<i>3 months and under 6 months.</i>	<i>6 months and under 12 months.</i>	<i>Total under 1 year.</i>
1931	21.58	5.22	26.80	4.11	30.91	4.61	8.00	43.52
1932	22.94	4.72	27.66	3.58	31.24	3.07	6.75	41.06
1933	21.90	5.70	27.60	3.42	31.02	2.88	5.45	39.35
1934	24.02	5.12	29.14	4.94	34.08	4.76	7.52	46.36
1935	22.99	4.77	27.76	3.44	31.20	2.87	5.37	39.44
1936	23.64	5.93	29.57	4.07	33.64	3.66	6.17	43.47
1937	22.80	5.58	28.38	3.10	31.48	3.05	6.15	40.68
1938	23.42	4.48	27.90	3.80	31.70	3.46	6.68	41.84
1939	22.96	4.48	27.44	2.48	29.92	3.56	7.54	41.02
1940	21.12	4.46	25.58	3.85	29.43	3.62	5.97	39.02
1941	23.55	5.97	29.52	4.23	33.75	4.18	5.84	43.77
1942	20.97	4.52	25.49	3.97	29.46	4.27	6.46	40.19
1943	19.61	4.23	23.84	3.56	27.40	3.42	5.36	36.18
1944	18.30	3.66	21.96	2.16	24.12	2.38	4.18	30.68
1945	18.28	3.52	21.80	2.43	24.23	2.61	3.79	30.63
1946	18.82	3.14	21.96	2.19	24.15	2.37	3.70	30.22
1947	18.22	3.24	21.46	2.26	23.72	2.51	3.58	29.81
1948	18.38	2.95	21.33	2.47	23.80	2.60	3.90	30.30
1949	16.93	2.31	19.24	2.05	21.29	2.47	3.53	27.29
1950	16.16	2.63	18.79	2.30	21.09	2.53	3.42	27.04

Table VII shows the loss of infant life at different age groups. The greatest loss is in the neonatal period where, within the first week the rate in 1950 was 16.16; and in the next three weeks of life 2.63; the total rate in the first month of life being 18.79.

In Sydney the loss of life in the first week was 16.09 (of a total rate for the first year of 25.44). In the remainder of the State the loss of life in the first week was 16.21 (of a total rate of 28.18).

Diarrhoea of the newborn caused four deaths in Sydney and eight in the remainder of the State. Of infants over four weeks, twenty-six who died in Sydney and fifty-five who died in the remainder of the State were premature.

If any reduction is to be achieved in the high neonatal mortality rates, the objective must be twofold—first the prevention of premature births and second the proper care of babies born prematurely.

GRAPH 13.

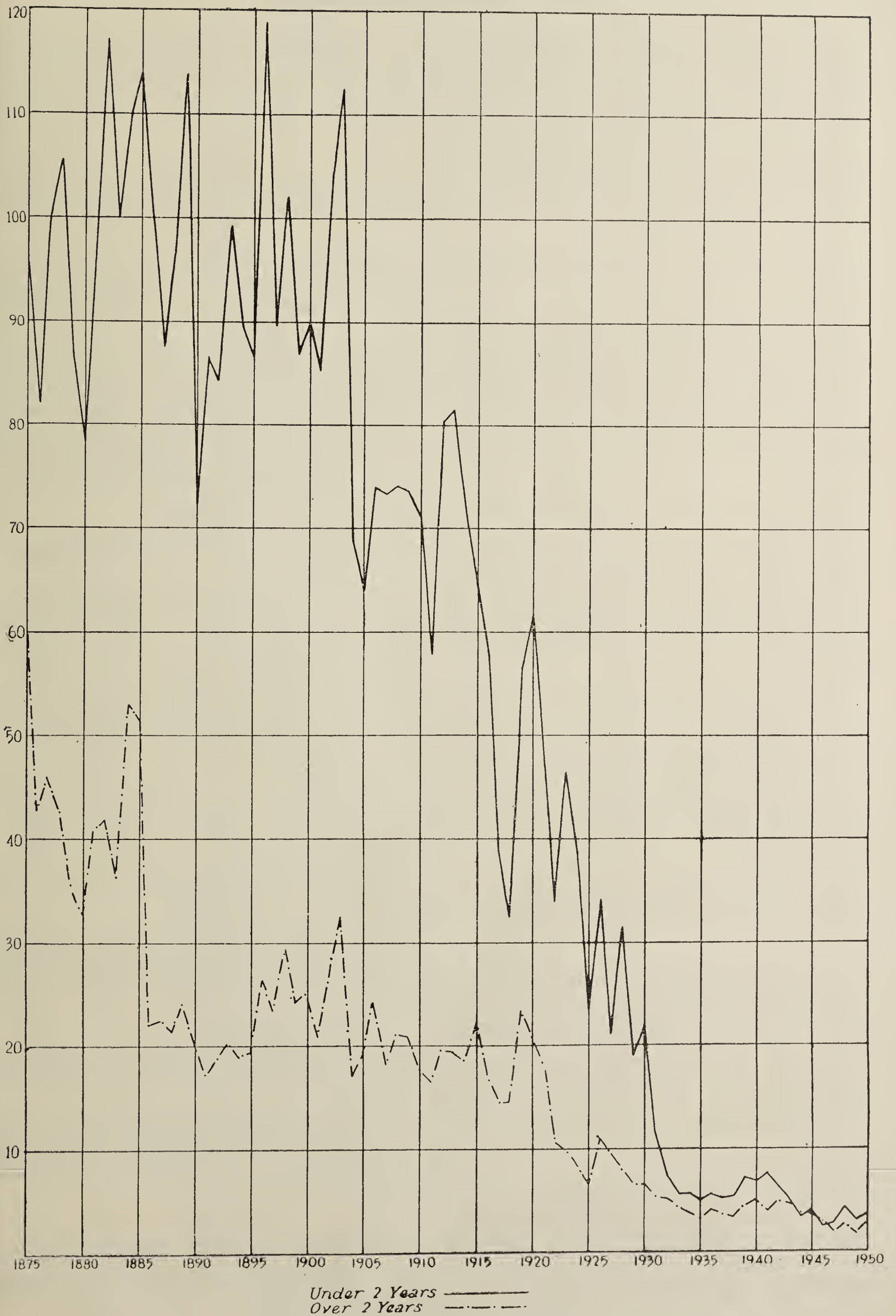
Infantile Mortality, New South Wales—In Age Periods under 1 year, from 1895–1950.



From 1950 all death rates are compiled according to the VIth International classification.

GRAPH 14.

Diarrhoea and Enteritis—Annual Death Rate per 100,000 of the Population in New South Wales, 1875–1950.



From 1950 all death rates are compiled according to the VIth International classification.

PART III—PRE-SCHOOL HEALTH SERVICE.

A health service has been provided since 1946 by this Division for the pre-school centres conducted by the two voluntary organisations subsidised by the Government: the Kindergarten Union (in 1950 receiving £20,000 through the Department of Education) and the Sydney Day Nursery and Nursery Schools Association (in 1950 receiving £20,000 through the Department of Labour and Industry and Social Welfare).

The former offers a service at thirty kindergartens in the metropolitan area from 9 a.m. till 3 p.m. during the three school terms and the latter at fourteen day nurseries and nursery schools either from 7.30 a.m. to 5.30 p.m. or from 8 a.m. to 5 p.m., depending on the requirements of the locality. This service is provided throughout the year except for a three weeks' break at Christmas.

No fees are charged but the cost of meals at the pre-school centres varies from three to ten shillings per week. In special circumstances no charge at all is made.

The object of the health service is to improve and safeguard the physical and mental health of the children. Regular visits by specially qualified medical officers build up a liaison between themselves, the director and the mother to this end. To achieve this the medical officer should see each child twice yearly. At the first visit the child is examined to determine any physical defect; the mother is interviewed and the director (or matron) co-operates in supplying any further information which may help in the medical officer's assessment of the child as a whole. In this way a total picture of the child's general health, nutritional status, dental health and social environment, behaviour and intelligence, is available.

The interest of the director (or matron) is basic to the success of the work and with few exceptions is assured.

The correction of physical abnormalities is dealt with in various ways: if the condition warrants it, the mother is advised to take the child to her own doctor or is referred to the appropriate hospital or specialist. If otherwise, the director is advised as to suitable exercises which can be incorporated in the ordinary daily programme and the mother is advised as to suitable shoes or clothing and any special care the child may need at home. By means of this instruction and guidance within the pre-school centres many conditions are corrected.

Daily inspections on entering in the morning are encouraged at all centres. This routine prevents the spread of infection by early detection of infected noses and throats and other signs of contagion and infection. The director soon becomes expert at sighting the tonsils and assessing from the condition of the tonsils, throat, mouth and tongue, together with a general survey for swollen glands or rashes, whether the child is likely to convey infection to others. As this age group is most vulnerable to infections and respiratory diseases, the prevention of cross infection is a major part of any health programme. Routine height and weight records are kept by the director (or matron).

Where behaviour problems, e.g., bed wetting, tantrums, feeding difficulties, aggression, etc., exist, the medical officers discuss all aspects of the care of the child with the mother and the director; where adjustment fails, the child is referred to a child guidance clinic.

At fourteen day nurseries 733 children were examined once and 951 twice during the year. In addition, seventy-three children were seen by the medical officers for conditions requiring attention at other times. It was possible to arrange interviews with 336 mothers, i.e., about half of the children attending the nurseries. In all, the medical officers made 141 visits.

At the thirty kindergartens 1,090 children were examined once and 1,617 had a second examination. In addition, 76 children were seen by the medical officers for conditions requiring attention. All except five mothers were interviewed. Two hundred and thirty visits were made. One new kindergarten was opened during the year at Burwood.

Dental Health.

Close liaison is kept with the Dental Hospital for the care of the teeth. Some children from the kindergartens are sent direct to the Dental Hospital: by courtesy of the Association, children from six kindergartens attend four of the eight dental clinics held in the specially equipped dental room at the day nurseries. These clinics are staffed by dentists from the Dental Hospital. The dental chairs and the special equipment were provided by the Minister for Health in 1945.

Four hundred and thirty-one children, i.e., 15.9 per cent. of those examined, were found to suffer from dental caries. At the day nurseries, however, where the dental supervision is regular, only those children who had enrolled since the visit of the dentist, i.e., 4.2 per cent. of the children examined, were found to have dental caries. This is the excellent result of the regular dental service given.

Immunisation.

Immunisation against diphtheria is compulsory: 25 children attending the day nurseries and 39 attending the kindergartens were referred for immunisation during the year.

Nutrition.

The nutrition of the children is safeguarded as the nutritional programme of each centre is guided by the advice of one of the trained dietitians from the Department in addition to the individual advice from the Medical Officer to the mother.

The estimation of the nutritional state of a child varies to some extent with the individual assessor. This variation is minimised by working to certain recognised standards. Each year there appears to be an improvement in the nutritional status of the children particularly in the day nurseries: this could reasonably be attributed to the close liaison established between the Medical Officers, Director, Dietitian and the mothers by the health service. As would be expected the proportion of better standard nutrition is higher in the kindergartens as these centres care for fewer under-privileged children and fewer children with difficult home conditions.

Kindergartens.

Nutrition.	1948.	1949.	1950.
	Per cent.	Per cent.	Per cent.
Excellent	11.8	23.2	26.8
Good.....	88.1	66.2	63.1
Fair	11.6	10.09	9.7
Bad	1.1	0.35	0.33

Day Nurseries and Nursery Schools.

Nutrition.	1948.	1949.	1950.
	Per cent.	Per cent.	Per cent.
Excellent	10.6	22	22.61
Good.....	66.9	60	64.54
Fair	18.2	16	12.58
Bad	4.1	2	0.35

Bad Posture.

Only the severe degrees of bad posture were recorded. There were eighteen cases at the kindergarten and four cases at the day nurseries. It is almost invariable that the bad posture is found in the 4 to 5 year age group and is frequently found in children who have social and emotional difficulties.

Knock Knees.

This condition was fairly common and was assessed on a set standard of over 1 inch separation of the internal malleoli, with the child's knees together and the legs straight in the sitting position.

In the day nurseries 232 children had knock knees. Of these 76 were referred for orthopaedic treatment and 136 were kept under observation and given advice on footwear, exercises, nutrition, etc. At the kindergartens 371 had this condition. Of these 161 were referred for orthopaedic treatment and 210 were kept under observation.

Flat Feet.

Flat feet were diagnosed in 382 instances in the kindergartens and 284 in the day nurseries. Of the latter 76 went for orthopaedic treatment and 133 of the former. The remainder were kept under observation and given advice on nutrition, exercise and footwear.

TABLE VIII.—Kindergartens, 1950.

	Sessions.	First Examination.	Parents.	Subsequent Examination.	Occasional Examination.	Dental Caries.	Not Immunized.	Enlarged Glands.	Enlarged Tonsils.	Nutrition.		Knock Knees.		Flat Feet.		Infectious Diseases.						
										Good.	Fair.	Bad.	Observation.	Treatment.	Observation.	Measles.	Mumps.	Chicken Pox.	Scarlet Fever.	Whooping Cough.	German Measles.	Diphtheria.
East Chatswood	8	37	38	42	29	5	...	6	27	16	56	7	1	4	5	5	...	...	...	...	...	...
Eastwood	11	53	50	50	51	13	...	8	38	29	73	1	...	...	12	23	...	...	...	...	...	...
Blue Bird	7	30	31	58	17	15	...	2	20	18	58	12	...	...	9	26	...	...	...	...	...	...
Cheltenham	9	32	27	45	13	9	...	2	12	29	40	8	...	...	...	7	...	...	...	...	...	...
Globe	7	48	49	63	19	4	...	5	26	29	70	7	...	...	...	28	...	...	...	...	...	...
Ellen Desailly	11	34	38	83	23	33	...	1	19	28	74	15	...	...	12	15	...	...	...	...	...	...
Francis Newton	8	34	33	68	32	24	...	6	28	31	56	12	3	...	...	22	...	...	...	...	...	...
Harold Wheen	7	20	23	59	17	7	...	2	19	60	60	9	...	...	10	22	...	...	...	...	...	...
Killara	8	42	37	63	26	2	...	6	24	39	57	9	...	...	8	22	...	...	...	...	...	...
Lance	8	28	36	63	39	22	...	6	37	29	53	9	...	...	4	...	...	...	...	...	...	...
Leichhardt	7	18	17	57	15	12	...	5	14	5	54	16	...	...	...	1	...	...	...	...	...	...
Little Citizens	8	28	28	65	19	5	...	1	20	10	70	13	...	...	5	14	...	...	...	...	...	...
Newtown	8	29	33	61	35	19	...	9	31	12	57	19	...	...	20	25	...	...	...	...	...	...
Parramatta	8	44	38	55	22	22	...	3	21	31	58	8	...	...	7	1	...	...	...	...	...	...
Peter Pan	8	23	15	87	21	6	...	2	25	26	74	10	...	...	4	...	...	...	...	...	...	...
Phoenix	8	38	32	63	11	25	...	...	15	9	77	14	...	...	...	28	...	...	...	...	...	...
Surry Hills	8	35	32	48	17	9	...	3	21	22	48	13	...	...	20	18	...	...	...	...	...	...
Sunbeam	6	26	21	36	22	12	...	...	16	10	41	11	...	...	3	16	...	...	...	...	...	...
Samuel Cohen	6	29	33	41	21	23	...	5	12	25	38	7	...	...	5	18	...	...	...	...	...	...
Waverley	7	24	29	68	23	10	...	4	24	45	44	2	...	...	...	...	...	...	...	...	...	...
Crusader	8	33	31	60	27	18	...	3	18	29	60	4	...	...	4	...	...	...	...	...	...	...
Croydon	8	32	31	73	19	6	...	2	15	31	65	9	...	...	6	...	...	...	...	...	...	...
Petersham	8	48	48	29	19	11	...	...	22	23	47	7	...	...	4	10	...	...	...	...	...	...
Golden Fleece	10	34	34	103	33	31	...	...	27	34	91	12	...	...	5	3	...	...	...	...	...	...
Hargrave Park	13	61	103	62	57	35	...	15	44	21	95	7	...	...	5	26	...	...	...	...	...	...
Wickham	7	35	31	20	16	9	...	...	20	21	30	4	...	...	4	...	...	...	...	...	...	...
Waratah	3	34	30	33	18	10	...	...	15	39	24	4	...	...	...	...	...	...	...	...	...	...
Wayfield	3	48	45	28	14	18	...	...	20	25	49	2	...	...	4	...	...	...	...	...	...	...
Bradfield Park	11	62	68	34	44	13	...	...	51	19	68	9	...	...	...	31	...	...	...	...	...	...
Burwood	6	51	24	...	7	3	...	3	7	34	13	4	...	...	...	14	...	...	...	...	...	...
	230	1,090	1,085	1,617	76	431	39	110	688	725	1,709	264	9	161	195	442	95	96	4	19	6	2
	...	...	...	...	...	15.9%	...	4.06%	25.4%	26.8%	63.1%	9.7	0.33%	5.9%	7.2%	...	...	...	...	...	...	...

TABLE IX.—Day Nurseries, 1950.

Sessions.	First Examination.	Parents.	Subsequent Examination.	Occasional Examination.	Dental Caries.	Not Immunized.	Enlarged Glands.		Enlarged Tonsils.		Nutrition.			Knock Knees.		Flat Feet.		Infectious Diseases.						
							Observation.	Treatment.	Observation.	Treatment.	Excellent.	Good.	Fair.	Bad.	Observation.	Treatment.	Observation.	Treatment.	Measles.	Mumps.	Chicken Pox.	Scarlet Fever.	Whooping Cough.	German Measles.	Diphtheria.
Woolloomooloo	12	52	89	4	1	..	45	1	38	..	16	112	13	16	2	25	1	3	4	1	1	..	..
Forest Lodge	12	73	73	6	2	3	46	1	32	1	36	89	20	6	4	16	6	11	2	..	..	..	..
North Sydney	10	53	55	8	1	8	36	1	17	2	21	58	29	10	8	17	11	10	30	..	..	..	..
Surry Hills	13	59	83	9	4	..	33	1	40	..	24	92	24	12	8	12	24	4	2	..	..	..	..
Paddington	13	71	105	6	1	..	37	..	31	..	62	93	21	6	9	14	6	1	..	..	..	..	..
Redfern	12	101	80	15	3	..	29	..	33	..	46	115	18	8	7	10	8	3	..	..	..	..	..
Marrickville	9	36	23	3	7	..	22	3	22	4	37	44	10	5	6	7	7	..	..	..	..	..	..
Kingsford	6	37	43	3	3	..	14	..	10	..	70	70	10	16	6	7	7	..	..	..	..	..	..
Mosman	8	25	60	3	2	..	13	..	20	..	6	66	12	27	5	33	5	17	..	..	..	..	..
Herne Bay	9	48	39	3	11	5	45	7	37	7	18	59	9	4	5	8	2	23	5	..	..	..	..
Waverley	12	46	93	7	6	..	34	4	40	6	57	71	11	12	11	18	6	1	2	..	..	..	..
Newtown	11	45	72	1	8	..	66	10	53	9	15	88	14	12	4	20	7	1	1	..	..	..	..
Erskineville	10	55	33	5	2	..	29	..	27	..	24	88	19	22	2	18	4	1	1	1	..	..	..
Katoomba	4	33	28	..	15	4	26	2	22	2	19	40	2	..	2	3	26	4	5	..	..	1	..
Totals	141	733	951	73	72	25	475	30	422	31	381	1,085	212	156	76	208	392	58	105	3	12	1	..	
					4.2%	1.5%	28.2%	1.78%	25%	1.8%	22.6%	64.5%	12.5%	9.2%	4.5%	12.3%	4.5%

Pigeon Toes.

Sixteen kindergarten children and ten day nursery children were found to be pigeon-toed. Corrective exercises and good shoes were ordered and they were kept under observation.

Enlarged Adenoids and Tonsils and Cervical Glands.

As the poliomyelitis epidemic prevented the hospitals from operating on tonsils and adenoids over a lengthy period of the year there was a considerable increase in the numbers of enlarged tonsils and cervical glands which were kept under observation.

At the kindergartens, enlarged cervical glands were found in 836 children; 110 were referred for treatment. After a period of observation of more than six months, 98 out of 786 cases of enlarged tonsils and adenoids were referred for medical or surgical treatment.

At the day nurseries enlarged cervical glands were found in 475 children; 30 were referred for treatment. After prolonged observation 31 out of 422 cases of enlarged tonsils and adenoids were referred for treatment.

Tonsillitis.

The 10 children at the kindergartens and the 10 at the day nurseries who were suffering from tonsillitis when examined have also been included in the figures for enlarged tonsils and glands above.

Otitis Media.

Twelve kindergarten children and 9 day nursery school children had aural discharges. All were referred to an ear, nose and throat surgeon at the Children's Hospital Out-patients.

Strabismus.

Twenty-two kindergarten children and 10 day nursery children suffered from some degree of strabismus and were referred to an ophthalmic surgeon for treatment.

Bronchitis.

Twenty-four kindergarten children and twenty-nine day nursery children were found to be suffering from bronchitis and, where necessary, were referred for treatment.

Heart Murmurs.

In 16 kindergarten children and 12 day nursery children it was found during a routine examination that a mitral systolic murmur was present. Each of these cases was very carefully investigated for signs of rheumatism or any other disease which might be the cause of the murmur. In several of the cases the children had suffered a recent attack of measles but in others no cause could be found. In these cases the murmur disappeared after some months. Only one case could be attributed to rheumatism.

Anaemia.

Blood examinations were not done but 15 kindergarten children and 6 day nursery school children were considered to be exceptionally pale and were ordered iron therapy. Those who did not respond were sent for investigation and treatment at a hospital.

Urticaria.

This is more prevalent in the summer months though a common occurrence all through the year. At the kindergartens 45 children suffered from a severe degree of this condition and 28 at the day nurseries.

Umbilical Hernia and Protruding Umbilicus.

Umbilical hernia is one of the commonest abnormalities found amongst pre-school children. Twenty-four of the kindergarten and 27 of the day nursery children were found to have this condition. In addition, 10 of the kindergarten children and 9 of the day nursery children had an umbilicus that was protruding but not definitely herniated.

Absence of Director.

In 1950 I was awarded an overseas Travelling Fellowship by the World Health Organisation to study administrative techniques and practices concerning Maternal and Child Health. During my absence in the latter part of the year Dr. E. C. Wallace was Acting Director of Maternal and Baby Welfare.

Acknowledgments.

Baby Health Centres.—I wish to express my appreciation to the local government authorities, the local branches of the Country Women's Association and other citizens' committees for the valuable support given by them to the establishment, replacement and main finance of Baby Health Centres. Since the inception of the 1944 policy the local authority provides the site for the centre and 50 per cent. of the cost of erecting and equipping it, and maintains the centre when established. Nursing service is provided completely by this Department.

This policy has called for considerable expenditure of funds by Country Branches and the willingness with which such financial responsibility has been undertaken by the Association has done a tremendous amount towards furthering the Baby Health Centre service throughout the State.

Tribute to Nurse Inspectors and Nursing Staff and Clerical Officers.—I would also like to pay tribute to the loyal and co-operative manner in which the Nurse Inspectors and Clerical Officers have carried out their duties at Head Office and to the splendid work done by the Baby Health Centre Sisters throughout the State.

Voluntary Organisations Organising Day Care for Pre-school Children.—Thanks and appreciation to the administrative officers, the directors, matrons and committees are offered by the Department for their co-operation in maintaining the health service for the children.

Medical and Administrative Staff of the Division of Maternal and Baby Welfare.—I would like to express my appreciation to the Acting Director, the Senior Medical Officer, the three Medical Officers and the Administrative Officers for their interest and effective liaison with all branches of the activities of the Division which has contributed materially to the successful extension of the work.

The appreciation of the Division is extended to the administrative staff at Head Office, and the other Branches and Divisions with which we have worked throughout the year.

E. TUBERCULOSIS.

REPORT OF THE DIRECTOR OF TUBERCULOSIS FOR THE YEAR ENDED 31st DECEMBER, 1950.

Staff.

Director of Tuberculosis for New South Wales.—Dr. Marshall Andrew, M.B., Ch.M.
Deputy Director.—Dr. John Hughes, M.B., Ch.M.
1 Typiste.
1 Male Clerk.
1 Female Clerk.
2 Messengers.
13 Visiting Nurses.

Notifications.

The total notifications of all forms of tuberculosis during the year 1950 were 1,787, representing an increase of 146 for the year when compared with 1,641 cases for 1949.

Deaths.

Deaths from all forms of tubereulosis during 1950 numbered 671 compared with 769 for the year 1949, representing a decrease of 98. The death rate per 100,000 population was 20.86, the lowest ever recorded in New South Wales.

Clinics.

Eleven clinics operated throughout the year, and all clinics and hospitals dealing with the treatment of tuberculosis are functioning on a satisfactory basis.

X-Rays.

The total X-Rays at Clinics in the Metropolitan District for the year is shown in the following statement.

Total Metropolitan Area Clinic X-Rays, 1950...	36,230
Total Metropoliatn Area Clinic X-Rays, 1949...	32,141
Increase....	4,089

X-Rays at Clinics in the Newcastle District for 1950 were 2,170—the same number as for 1949.

The Six Day Private Group X-Ray Service is continuing with very satisfactory results, and retains the popularity of the general public as is illustrated by the following figures:

Combined Group X-Rays for the year 1950	18,250
Combined Group X-Rays for the year 1949	17,723
Increase	527

Lectures and Addresses.

Lectures and addresses were given at various City and Suburban areas, also at Newcastle and in country districts. The Division was represented by exhibits at the Mudgee and Orange Agricultural Shows.

Vaccination.

B.C.G. Vaccination has been undertaken at Royal North Shore Hospital, Canterbury District Hospital, Albion Street Clinic, Red Cross Clinic, Waterfall Sanatorium and Randwick Auxiliary Hospital.

NOTIFICATIONS, 1950.

TABLE I.—Showing the Age and Sex Incidence of the Cases of Pulmonary Tuberculosis notified during the year 1950.

Age Group.	Metropolitan Combined Sanitary District. Mean Population 1,711,290			Hunter River Combined Sanitary District. Mean Population 265,750			Broken Hill Combined Sanitary District. Mean Population 31,020			Mitchell Health District. Mean Population 127,260			Richmond-Tweed Health District. Mean Population 119,030			South Coast Health District. Mean Population 174,920			Remainder of State. Mean Population 795,622			Whole State. Mean Population 3,224,892		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Under 1 year.....	3	2	5	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	4	2	6
1-4 years	5	5	10	1	3	4	...	...	...	...	1	1	...	...	...	...	...	...	2	1	3	8	10	18
5-14 „	11	11	22	1	...	1	...	...	...	2	...	2	...	...	...	...	...	...	3	...	3	17	11	28
15-24 „	92	125	217	6	12	18	...	2	2	2	4	6	1	...	1	3	4	7	7	17	24	111	164	275
25-34 „	149	147	296	7	9	16	1	1	2	9	7	16	3	4	7	4	9	13	26	31	57	199	208	407
35-44 „	129	85	214	13	9	22	2	2	4	7	3	10	4	1	5	11	6	17	27	16	43	193	122	315
45-54 „	175	48	223	15	7	22	4	...	4	3	1	4	5	...	5	9	...	9	20	2	22	231	58	289
55-64 „	159	38	197	20	7	27	4	...	4	4	3	7	...	...	9	3	12	38	4	42	234	55	289	
65 and over	86	15	101	7	5	12	2	...	2	4	...	4	4	1	5	7	1	8	23	5	28	133	27	160
All Ages	809	476	1,285	70	52	122	13	5	18	32	19	51	17	6	23	43	23	66	146	76	222	1,130	657	1,787

TABLE II.

Showing the Number of Deaths from All Forms of Tubereulosis during the year ended 31st December, 1950.

	Males.	Females.	Total.
Respiratory System	461	173	634
Meninges and Nervous System...	13	8	21
Other	10	6	16
Total	484	187	671

TABLE III.

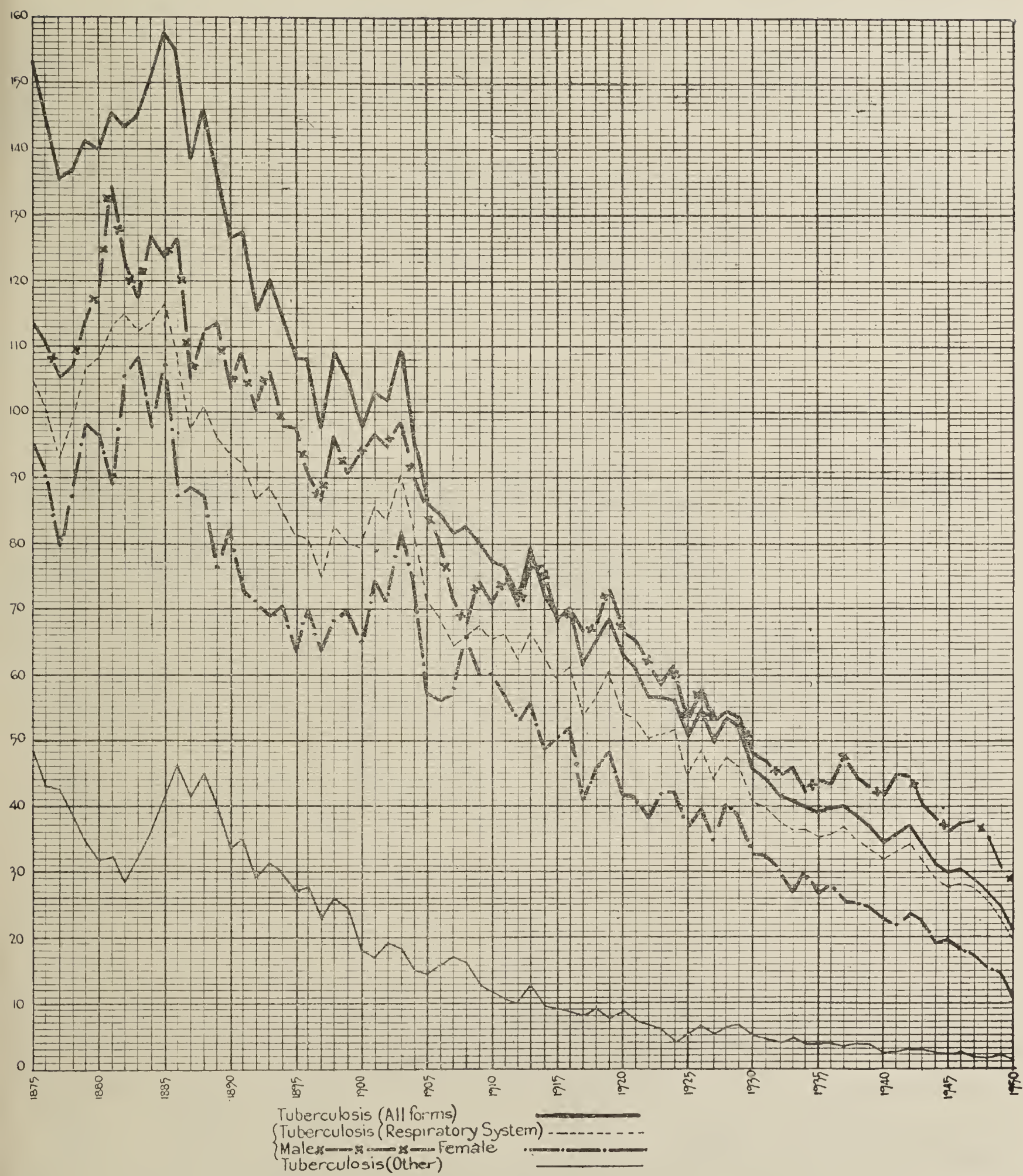
Showing the Age and Sex of Persons whose Deaths from Pulmonary Tuberculosis were notified during the year ended 31st December, 1950.

Partieulars not available from Commonwealth.
Statistician as at 14th February, 1952.

(As from 1st January, 1952, records are being kept in Division whereby information for Table III will be readily available early in subsequent year.)

GRAPH 15.

Tuberculosis—Annual Death Rate per 100,000 of the Population in New South Wales, 1875–1950.



From 1950 all death rates are compiled according to the VIth International Classification.

TABLE IV.—Showing Institutional Accommodation available for Patients suffering from Pulmonary Tuberculosis.

Sanatoria and Hospitals.	Type of Cases Received.	Number of Beds.		
		Male.	Female.	Total
1. Waterfall Sanatorium (under Government control)	Moderately advanced and advanced ...	135	88	223
2. Randwick Auxiliary Hospital (under Government control)	Far advanced	80	70	150
3. Queen Victoria Homes (subsidised)—				
Thirlmere	Minimal and moderately advanced .....	...	76	76
Wentworth Falls	Minimal and moderately advanced	54	...	54
4. Red Cross Society (subsidised)—				
“Bodington” at Wentworth Falls	Minimal and moderately advanced	100	...	100
“Malahide” at Pennant Hills	Far advanced	10	11	21
Eva Hordern Hospital at Strathfield	Pregnant tuberculosis sufferers .....	...	12	12
5. R. T. Hall Sanatorium	All types minimal .....	...	16	16
6. Private Hospitals (approximately)	All types minimal .....	...	...	69
7. Repatriation Department—				
Prince of Wales Hospital	All types minimal	88	...	88
Lady Davidson Home	All types minimal	276	...	276
8. Lideombe State Hospital	Chronic males	30	...	30
9. Lourdes Hospital, Killara	All types .....	...	19	19
10. Rankin Park Chest Hospital	All types	25	25	50

TABLE V.—Showing Number of Patients receiving Institutional Treatment for twelve months ended 31st December, 1950.

	Queen Victoria Sanatorium, Wentworth Falls.	Queen Victoria Sanatorium, Thirlmere.	Bodington Sanatorium, Wentworth Falls.	Waterfall Sanatorium.	Red Cross Malahide Sanatorium, Pennant Hills.	R. T. Hall Sanatorium, Hazelbrook.	Randwick Auxiliary Hospital.
1. Number of patients in Institution on 1st January, 1950	48	64	107	262	22	12	154
2. Number of patients admitted during year	48	73	166	175	26	9	122
3. Number of patients discharged (including deaths)	43	80	170	182	26	15	127
4. Number of patients remaining in Institution on 31st December, 1950	53	57	102	255	22	9	149
5. Average daily number of beds occupied	50·74	62·12	100	265	22·96	7·8	151·63

AVERAGE RESIDENCE IN SANATORIA AND HOSPITALS.

TABLE VI.—Showing the Average Residence in Days and Condition on Discharge from Sanatoria and Hospitals of Patients under Treatment for period of twelve months ended 31st December, 1950.

Condition on Discharge.	Queen Victoria Sanatorium, Wentworth Falls.		Queen Victoria Sanatorium, Thirlmere.		Bodington Sanatorium, Wentworth Falls.		Waterfall Sanatorium.		Red Cross Malahide Sanatorium, Pennant Hills.		R. T. Hall Sanatorium, Hazelbrook.		Randwick Auxiliary Hospital.	
	No. of Patients.	Average Residence in Days.	No. of Patients.	Average Residence in Days.	No. of Patients.	Average Residence in Days.	No. of Patients.	Average Residence in Days.	No. of Patients.	Average Residence in Days.	No. of Patients.	Average Residence in Days.	No. of Patients.	Average Residence in Days.
1. Arrested (A) .....	...	...	5	214·8	2	1,425	...	...	...	...	...	...	...	...
2. Quiescent (Q).....	21	315·47	45	317·24	76	247	5	4,115	1	381	...	...	...	...
3. Much Improved (M.I.)	13	398·76	13	439·61	33	286	...	...	3	253	20	7·1	...	...
4. Improved (I) ...	3	198	8	312·5	11	236	65	495	4	448·2	...	...	30	678·53
5. Stationary (S) ...	5	239·8	4	30·25	13	237	73	461	3	185·2	3	·7	18	130·72
6. Worse (W)	1	43·0	5	27·2	5	326	...	...	1	113·0	...	...	2	210·5
7. Dead (D) .....	...	...	...	...	3	523	22	656	14	366·4	...	...	76	321·62

TABLE VII.

Condition on Admission.	Queen Victoria Sanatorium, Wentworth Falls.								Queen Victoria Sanatorium, Thirlmere.								Red Cross Sanatorium, Bodlugton, Wentworth Falls.							
	Condition on Discharge.								Condition on Discharge.								Condition on Discharge.							
	A.	Q.	M.I.	I.	S.	W.	D.	Total.	A.	Q.	M.I.	I.	S.	W.	D.	Total.	A.	Q.	M.I.	I.	S.	W.	D.	Total.
L1T1	7	...	...	1	...	...	8	2	4	2	...	3	1	...	12	...	18	9	...	3	...	...	30
L2T1	6	5	1	2	...	...	14	1	30	4	3	...	2	...	40	...	31	11	4	5	2	...	53
L1T2	1	...	...	...	1	...	...	1	...	...	...	...	1	...	4	...	...	...	...	...	4
L2T2	6	6	...	...	...	...	12	2	11	5	3	1	2	...	24	2	21	8	4	3	1	1	40
L3T1
L3T2	1	2	...	...	...	...	3	...	...	...	1	...	...	...	1	...	...	2	...	2	1	...	5
L1T3
L2T3	1	...	1	...	...	...	2	...	...	1	1	...	...	...	2	...	...	1	...	...	...	1	2
L3T3	1	1	1	...	3	...	...	...	...	...	...	...	...	...	2	2	3	...	1	1	9
Totals	21	13	3	5	1	...	43	5	45	13	8	4	5	...	80	2	76	33	11	13	5	3	143

TABLE VII.

Condition on Admission.	Waterfall Sanatorium.								Red Cross Malahide Sanatorium, Pennant Hills.								R. T. Hall Sanatorium, Hazelbrook.							
	Condition on Discharge.								Condition on Discharge.								Condition on Discharge.							
	A.	Q.	M.I.	I.	S.	W.	D.	Total.	A.	Q.	M.I.	I.	S.	W.	D.	Total.	A.	Q.	M.I.	I.	S.	W.	D.	Total.
L1T1	1	...	...	...	1	...	1	1	...	...	...	...	2	...	...	17	...	...	...	...	17
L2T1	12	5	...	...	17	...	...	1	1	...	...	...	2	...	...	...	...	...	...	...	...
L1T2	1	...	...	...	1	...	...	...	...	...	...	...	...
L2T2	1	...	6	5	...	...	12	...	...	1	1	...	...	...	2	...	...	...	...	...	...	...	...
L3T1	2	...	13	4	...	1	20	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
L3T2	2	...	32	59	...	17	110	...	...	...	3	...	...	...	3	...	...	...	3	...	...	...	3
L1T3	1	...	...	...	...	...	...	...	...	...	...	...
L2T3	1	1	...	2	...	...	...	...	...	...	...	...
L3T3	1	...	...	4	5	...	...	...	...	...	...	14	14	...	...	2	...	1	...	...	3
Totals	5	...	65	73	...	22	165	...	1	3	6	1	1	14	26	...	...	19	...	4	...	...	23

TABLE VII.

Condition on Admission.	Randwick Auxiliary Hospital.							
	Condition on Discharge.							
	A.	Q.	M.I.	I.	S.	W.	D.	Total.
L1T1
L3T1	1	...	...	...	1
L1T2
L2T2	2	2	...	...	4
L3T1
L3T2	10	6	1	4	21
L1T3	1	1	...	1	3
L2T3	1	2	...	...	3
L3T3	15	7	1	71	94
Totals	30	18	2	76	126

F. INDUSTRIAL HYGIENE.

REPORT OF THE DIRECTOR DIVISION OF INDUSTRIAL HYGIENE FOR THE YEAR ENDED 31st DECEMBER, 1950.

Divisional Staff.

Director.—C. J. Cummins, M.B., B.S., D.P.H. (appointed 27th February, 1950).
Medical Officers.—T. L. Dunn, M.B., B.S., D.P.H., D.T.M. and H.; V. E. M. Sheppard, M.B., B.S.
Chief Scientific Assistant.—H. E. Rayner, B.Sc.
Scientific Assistants.—H. M. Whaite, B.E.; J. L. Sullivan, F.S.T.C.; C. L. Cullen, B.Sc., B.Ec. (resigned 27th November, 1950).
Laboratory Assistant.—W. J. Brown (resigned 6th April, 1950); S. G. Szeghy (appointed 16th August, 1950).
Clerical Officer.—Vacant.
Stenographer.—Mrs. M. Hill.

Introduction.

There was a marked increase in the amount of work carried out by the Division during the year. This was due largely to its functions becoming more widely known and appreciated by both employer and employee organisations. One satisfactory trend during the year was the increasing tendency for employers to request advice on matters of industrial hygiene. It is hoped to accelerate this trend with suitable publicity.

Import restrictions have resulted in an increasing industrialisation in New South Wales, and medical industrial hazards which previously were not apparent are now becoming more real. It is hoped that the occurrence of these hazards will be prevented by co-operation of management with this Division, particularly when installing new plant or prior to the commencement of new processes.

Under section 7A of the Factories and Shops Act, 1912, it is incumbent upon any person erecting a factory, or carrying out structural alterations or additions to an existing factory, to submit plans and specifications for approval to the Department of Labour and Industry and Social Welfare. Arrangements have been made with the Acting Chief Inspector of that Department for the submission of such plans to this Division, for advice regarding potential medical hazards and the adequacy of proposed preventive measures. It is hoped that this Divisional function will expand during the coming year, and that it will result in the elimination of many medical industrial hazards which otherwise would occur with increasing industrialisation.

During the year a very close liaison was maintained with the Department of Labour and Industry and Social Welfare, through the medium of the special liaison officer of that Department, Mr. W. Slade. As a result the medical industrial problems encountered by the various factory inspectors throughout the State have been notified quickly to the Division, and corrective measures have been facilitated. The co-operation and harmony which exists between this Division and the Department of Labour and Industry and Social Welfare, are due in no small measure to the efforts of this special liaison officer and the Acting Chief Inspector of Factories, Mr. H. Bartlett.

The Division still acts as the advisory body to the Department of Mines on the problems of dust suppression and ventilation in mines. During 1950 four scientists were trained in dust counting by this Division for the Joint Coal Board. The appointment of these officers will not interfere with the existing relationship between the Division and the Department of Mines, as the duties of the above officers are largely on a research basis to prepare data for the Joint Coal Board.

In the annual report for 1949, mention was made of the proposed health survey in the Gas Industry in New South Wales, as requested by the Royal Commission of Inquiry into the Gas Industry, 1949. This survey is well advanced and preliminary reports on certain sections of the Australian Gas Light Company and the North Shore Gas Company have been submitted. Reference will be made to these findings in a later section of the report. It is hoped to complete the survey by March, 1951.

Four members of the Division attended the I.L.O. Conference of Experts on Pneumoconiosis held at Sydney in February, two as observers (Whaite and Sullivan) and two as advisers (Cummins and Rayner). The recommendations of the Conference and the Director's comments thereon have been conveyed to the Director General of Public Health in an earlier report.

During 1950 the Division was represented on the following committees of the Standards Association of Australia:—

- (1) Statistics of Industrial Accidents (Mr. C. Cullen).
- (2) Paints and Varnishes (Mr. J. Sullivan).
- (3) Protective Occupational Clothing (Mr. H. Rayner).

- (4) Code of General Principles for Safe Working in Industry (Dr. C. J. Cummins).
- (5) Safety Standards Co-ordinating Committee (Dr. C. J. Cummins).
- (6) Refrigeration Sectional Committee (Dr. C. J. Cummins).
- (7) Refrigeration Sectional Committee (Revision sub-committee No. 2) (Dr. C. J. Cummins).

The Director was also a member of the Committee on Industrial Hygiene, the National Health and Medical Research Council of Australia.

This report is a summary of the more important investigations carried out and includes tables showing the number of cases of lead poisoning, occupational dermatitis and pneumoconiosis seen during the year. It will be divided into the following sections:—

- Inorganic Elements and Compounds.
- Organic Compounds.
- Occupational Dermatitis.
- Mining and Dusty Trades.
- Ventilation and Lighting.
- X-Rays and Radio-active substances.
- Constitutional Factors.
- Caisson Workers and Divers.

Table I gives a comparison of work carried out in 1950 as compared with 1949.

TABLE I.
Comparison of Work 1949–1950.

	1949.	1950.
Medical examinations	418	874
Blood counts	221	458
X-rays	98	344
Factory inspections	Not recorded.	160
Coal mine investigations in days	29	30
Investigation of ventilation in picture theatres.....	9	10

Inorganic Elements and Compounds.
Lead Poisoning.

During the year 200 employees in contact with lead were examined at the Division of Industrial Hygiene, with the following results:

Lead poisoned	17
Lead absorption	25
Normal or diseases not related to lead	158

Fifteen of the twenty-five cases of lead absorption indicated a dangerous exposure to lead. Two deaths from nephritis were notified to the Division as being attributed to lead.

The occupational distribution of these seventeen cases of lead poisoning, as compared with those of 1949, is given in Table II below.

TABLE II.
Distribution of Lead Poisoning by Trade.

Industry.	1949.	1950.	Occupation.	1949.	1950
Accumulator Battery Manufacture.	9	11	Moulder .....	...	1
			Paster	3	1
			Mixer.....	...	1
			Handling dry plates	1	2
			Oxide manufacture	5	3
			Lead reclaiming .....	...	1
Engineering	1	1	Group burner .....	...	1
			Separator .....	...	1
			Welder .....	...	1
			Sheet metal wor-kr ...	1	...
			Lead smelter	1	1
			Battery maintenance	1	1
Smelting of metals	1	1	House painter	4	1
Electrical trades ...	1	1	Ship painter .....	...	1
Painting	4	2	Batch mixer	1	...
Glass manufacturer Adventitious exposure.	1	...	Electrician .....	...	1

Lead poisoning is as yet not a notifiable disease in New South Wales and the figures obtained in Table II relate only to a limited group of employees engaged in lead trades in the metropolitan area of Sydney. No statistics are available for any other portion of the State, and undoubtedly the incidence of lead poisoning is higher than indicated. Even with the figures available, on a population basis the occurrence of lead poisoning in New South Wales compares unfavourably with the number of cases notified in England during 1948. Preliminary discussions have been held regarding the advisability of medical notification of this disease, as a complement to industrial notification as an accident under section 38 (3) of the Factories and Shops Act, 1912.

The system of remote control of certain lead trades by stippled cell counting at the Division was continued during the year. The industries involved are accumulator battery manufacturers in the metropolitan area, one glass works, one ore smelting factory and one manufacturer of printing inks. Similar services were also carried out by the Divisional medical officers for the New South Wales Department of Railways, and the Electrolytic Refining and Smelting Company at Port Kembla. The number of routine stippled cell slides counted during the year was 5,087. Further arrangements have been made with several small battery assembly plants for a quarterly medical inspection by the Divisional staff.

The Lead Hazard in Copper Ore Refining.—A large copper smelting and electrolytic refining plant on the South Coast was surveyed to determine the hazard from fumes in the smelter section. Here crude metallic sulphides are converted into metallic copper. The first step in this process is treatment of the concentrates in a blast furnace to remove major impurities. Charging is done from the top of the furnace, and tapping of the slag and copper matte from the forehearth at the base of the furnace. The sulphide in the copper matte is then oxidised by an air blast in a rotary converter, leaving blister copper of 95 per cent. purity. Slag and copper ore are removed from the converter in separate tipping operations. During the various steps of this process, fumes are copious and spread throughout the building. The density of these fumes and their sources of origin are illustrated below (illustrations 1-4).

These fumes consist of a complex mixture of about twelve substances of which the most important constituents from the viewpoint of industrial hazards are lead, arsenic and sulphur dioxide. Atmospheric analyses at various parts of the process are set out in Table III.

TABLE III.

Atmospheric Contamination during Copper Refining.

Position and Operation.	Lead mg. per c. metre.	Arsenic mg. per c. metre.
1. General atmosphere of converter building without rolling over of converter—		
(a) near centre of shop	0.058	...
(b) near converter operator	0.030	...
2. Alongside moulds after pouring in centre of obvious heavy fumes	0.019	0.0016
3. Eastern end of shop near centre line of building during rolling over of converter for inspection and tipping of slag	0.286	...
4. Near charging area of blast furnace	2.020	0.993
5. Platform alongside tapping hole of blast furnace during tapping of 3 ladles of copper matte	0.174	0.033
6. Crane driver's cabin	0.169	0.055

As the table indicates conditions at different times and locations are very variable, and on the basis of atmospheric analyses alone it would be difficult to assess the hazard from lead and arsenic. Medical and haematological examinations and lead urinary estimations did not reveal any abnormalities suggestive of lead absorption or intoxication. However, it was recommended that these fumes be controlled at their source to minimise the risk from sulphur dioxide which will be discussed under the next heading, and if this is carried out there should be no dangerous concentrations of other contaminants.

Sulphur.

Sulphur Dioxide.—Reference has been made in the previous discussion on ore smelting to the occurring of sulphur dioxide in the fumes arising from the smelter or converter section of

a large copper ore refining plant. Table IV indicates the concentrations of this substance during the various steps of this process.

TABLE IV.
Concentrations Sulphur Dioxide Copper Ore Refining.

Position and Operation.	Sulphur Dioxide p.p.m.
1. Alongside moulds after pouring in centre of obvious heavy fumes	10
2. Near charging area of blast furnace	7
3. Crane driver's cabin	100

The concentration of sulphur dioxide in the crane drivers' cabin was almost irrespirable to one member of the Division undertaking the investigation, but apparently caused little concern to the crane driver, aged 73.

Advice was tended to the company as to how to reduce the sulphur dioxide concentrations from what is a potentially dangerous level to a safer margin, which automatically will also cause a disappearance of any possibility of a lead or arsenic industrial hazard.

Arsenic.

One case of mild arsenical poisoning occurred during the year, and that in a labourer working among the manufacture of insecticides.

Cyanide.

The question of chronic cyanide poisoning has been the subject of some dispute. Hamilton and Hardy in their text book on *Industrial Toxicology* (1949), quote several cases which they attribute to chronic cyanide poisoning, the symptoms being, *inter alia*, dizziness, headache, muscular weakness, nausea and lassitude. From this aspect one case investigated at the Division is of interest.

The patient was a male, aged 45, who had worked for five and a half months at a firm of hardware manufacturers, case-hardening nickel steels with cyanide. At this particular firm the cyanide tanks were unventilated. Previously he had engaged in a similar occupation for twenty years. He complained of nausea, vomiting and giddiness when working over the cyanide pots. The digestive symptoms on occasions were severe enough to cause him to seek his bed for some days. Full investigations, including E.C.G. blood count and X-Ray of the chest were negative, and physical examination did not disclose any abnormality.

Two months after his visit an inspection was made to the factory, and the furnaces and quenching pots had been hooded to a natural exhaust opening to the exterior. The patient stated that conditions were much better and since the installation of this ventilation his symptoms had progressively improved.

Mercury.

A recent article by Agate and Buckell (*Lancet*, September 10, 1949) on mercurial poisoning in fingerprint photography, led to a request by the New South Wales Police Department for a similar investigation among members of their fingerprinting bureau. By a strange coincidence the numbers submitting for examination in both the N.S.W. and Lancashire police force were the same, viz., thirty-two. In both cases the powder used is the same (hydrargum creta B.P.), and the method of application is similar, using a soft brush and either blowing off or brushing off the excess powder. As in Lancashire, fingerprinting is specialised, and all breaking-in offences are investigated by staff from the central bureau.

The exposure appears to be much greater in Lancashire than in New South Wales, the rate of consumption of powder in the former being 5 pounds per month, and in the latter about 1 pound per month. Agate and Buckell state that in Lancashire the powder is "applied liberally from a well-loaded brush". Here it is applied lightly on selected surfaces only. Actual exposure to the powder here, even on a comparatively large search, would rarely exceed twenty minutes as against one-one and a half hours in Lancashire. Atmospheric mercurial contamination was determined with vigorous brushing as

described in the article, and with light brushing as practised in this State. The results were:—

Vigorous brushing (15-minute test)—2.78 mgms. of mercury per cubic metre.

Light brushing (10-minute test)—0.39 mgm. of mercury per cubic metre.

The exposure in Lancashire varied between 15 and 1,000 hours in the preceding year, with a mean exposure of 205.7 hours. This is excessive as compared with N.S.W. The exposure here in the preceding year varied from less than one hour to 244 hours, with a mean of sixty-four hours. The highest exposures—244, 187, 213, 168 hours—were incurred in “single fingerprinting” at the Bureau, and not with outside dusting. In single fingerprinting small exhibits are dusted and examined for identification at the bureau and the exposure is not comparable as regards possibility of mercurial intoxication, but they are included as such cases were included in the report of Agate and Buckell. The mercury in urine estimations have not all yet been completed, but results so far are not significantly different from those found in Lancashire, and vary from 0 to 104 microgrammes per litre. Table V gives a comparison of the two occupational groups:

TABLE V.
Comparison Occupational Exposure to Mercury.
Policemen New South Wales and Lancashire.

Mean Time of Employment Fingerprinting Department.		Estimated Mean Exposure Preceding Year.		Estimated Mean Exposure of Group in Preceding 2 Weeks.	
N.S.W.	Lancashire.	N.S.W.	Lancashire.	N.S.W.	Lancashire.
8.8 years	7.1 years.	64 hours	205 hours	1.1 hours	8.7 hours

In New South Wales there was no evidence whatever of mercurialism. The difference between the two groups would appear to lie in the vigorous brushing used in Lancashire, together with the greater exposure in that series. Working on a basis of 0.1 mgm. of mercury per cubic metre of air as the maximum atmospheric contamination for safe working over an eight-hour day, and assuming that the air intake of a sedentary worker is 0.46 cubic metre per hour, it would require 2.1 hours' continual light brushing to reach this level, as against only eighteen minutes daily with vigorous brushing.

There does not appear to be any necessity in New South Wales to modify existing procedures or change to any other type of powder.

Nitrogen.

Nitrous Fumes.—Atmospheric pollution from nitrous fumes is becoming more evident in New South Wales with the increase in the manufacture of chemical products previously imported. Three complaints were received at the Division during the year and in one instance the employees showed evidence of affection by an irritant gas.

This occurred in a firm manufacturing chloropierin (C Cl₃ NO₂), and is another illustration of the dangers that may arise from inadequate plant planning and layout. In this case a saccharin plant was modified to the production of chloropierin, and in the first stage a nitration process is carried on for the production of picric acid. From this nitration vat there was a marked escape of nitrous fumes during the peak of this process. These fumes were vented directly to the atmosphere, where they contaminated the surrounding workyard. Inside the factory nitrous fumes were also liberated by manual bucketing of the overflow nitration mixture to the filter beds, and the use of water in flushing out a drip tray. There was also an escape of chloropierin from a faulty condensing column, and it was difficult to determine whether the employees were affected by the nitrous fumes or the chloropierin. The question of efficient treatment of this contaminant is complicated by the financial capital of the company, and the small allotment on which the factory is built. Negotiations over a period of one year were unsuccessful in effecting improvements, and ultimately a Minister's order under Section 34 of the Factories and Shops Act, 1912, was served. Subsequently, this was held in abeyance until the company concerned investigated the possibility of importation of picric acid, as against the cost of installation of control of the nitrous fumes by scrubbing and/or recirculation.

This is a good illustration of the necessity, even from an economic viewpoint, for expert advice on the nature and control of medical hazards which may arise from new processes and plant installations, or in the modification of already existing processes.

Organic Solvents.
Benzol.

Two employees died, and a third subsequently succumbed due to injuries, from the effects of benzol while cleaning out a storage tank at a large steelworks in New South Wales. Three others were overcome by the fumes, but recovered without medical attention. The tank was one of five, each being 35 ft. long and 10 ft. in diameter, with strengthening horizontal and vertical angle irons at two points. There was one manhole for ingress and egress 10 ft. from one end. The tank had not been cleaned for ten years.

Respirators were not used and were not readily available. The safety harness was inefficient, and the strengthening angle irons were obstacles in the rescue of those overcome by the fumes. The coronial finding was accidental death, and certain recommendations were made to prevent a repetition of such an occurrence.

Twelve people were examined during the year at the Division for possible effects of benzol, but all examinations were negative.

Carbon Tetrachloride.

Routine examinations were carried out on three employees using this solvent at a naval depot. There was no evidence of any ill effects.

Occupational Dermatitis.

One hundred and thirty-four employees were examined during the year to determine the occupational basis of their skin rashes. This compares with 138 such examinations in 1949. An occupational basis was diagnosed in thirty-eight cases, and Table VI sets out the occupations involved and the suspected causative agents.

TABLE VI.
Causative Agents Occupational Dermatitis.

Causative Agent.	Occupation.	No. of Cases.
Cement	Storeman	1
	Tile layer	1
Acids—cresylic acid	Labourer	1
Cutting oils	Stove fitter	1
	Cold saw operator	1
Vegetable oils—turpentine	Carriage painter	1
Soap	Soap packer	1
	Hairdresser	1
Infection	Abattoirs labourer	1
Mites	Waterside workers	7
	Tobacco storeman	1
Mineral oils—kerosene	Labourers (spraying D.D.T. at abattoirs).	2
Copra	Waterside workers	4
Primary Irritant—		
Mustard seed	Waterside worker	1
Cause unknown	Waterside workers	2
Allergy—		
Wood (Borneo maple) ...	Waterside workers	2
Stinkwort		
(inula graveoleus)	Labourer	1
Cause unknown	Clothing machinist	1
	Waterside worker	1
Straw	Waterside worker	1
Heat	Labourer	1
	Heliographer	1
Arsenic	Pest exterminator	1
Trauma and infection.....	Builder's labourer	1
	Process worker	1
Water	Food processor	1

Mining and Dusty Trades.

Radiographs of Lungs of Persons in Dusty Trades.

X-rays were taken of 344 persons who reported for examination and/or advice. Of this number 275 workers were considered to be in trades from which some lung hazards might be expected. Of these 275 workers, the lungs of 231

showed no X-ray abnormality, 18 showed increased markings, 21 nodulation and 5 tuberculosis not associated with occupation.

TABLE VII.
Pneumoconiosis by Occupation.

Occupation.	Normal.	Increase in linear markings.	Nodulation.	Tuberculosis or Suspected Tuberculosis.
Foundry moulders ...	9	2	4	...
Foundry dressers	1	...	...	...
Foundry labourers ...	4	...	...	...
Welders and boiler-makers	2	...	...	...
Sand and shot blasters	8	...	...	...
Sandstone workers ...	5	...	4	...
Manganese workers ...	2	...	...	...
Coal and shale miners	1	2	1	...
Metalliferous miners	8	2	6	...
Pottery and brickyard workers	1	...	...	...
Furnace (silica) bricklayers	33	2	3	1
Firemen and stokers including ash pit workers, gas works operators and firemen	95	10	...	3
Asbestos workers	1	...	1	...
Mica workers	19	...	...	...
Woodworkers	1	...	...	...
Flourescent lamp tube workers	3	...	...	...
Bakers and flourmillers	1	...	...	...
Bulk wheat handlers	14	...	...	...
Textile workers	1	...	...	1
Ore millers and handlers	3	...	1	...
Divers and caisson workers	1	...	1	...
Rubber workers.....	2	...	...	...
Miscellaneous	16	...	...	...
Total	231	18	21	5

Coal Mining.

Routine Dust Tests.—During 1950 investigations were carried out in nine (9) northern, ten (10) southern and two (2) western collieries. Some of these investigations, made at the request of the Department of Mines, concerned complaints of dusty working conditions underground; others were carried out in the State-owned coal mines in order to comply with General Rule 12B (8) of the Coal Mines Regulation Act, which requires dust tests in every colliery at least once every six months.

Air Movement as Calculated by Katathermometer Readings.—Several collieries were visited during the training of four Dust Research Officers for the New South Wales Commonwealth Joint Coal Board. During these visits, dust samples were taken by various instruments (e.g., Owens' dust counter, thermal precipitator, midget impinger, Watson konimeter) and the ventilation was measured by anemometer, velometer and katathermometer. Certain discrepancies were observed between the air movements calculated from low pressure, high temperature and silvered katathermometer readings under comparable conditions. Consequently, an investigation has been commenced in certain southern collieries to determine the causes of these discrepancies. Already radiation from the surrounding strata appears to be eliminated as a possible cause of these differences, since all globe thermometer readings have shown close agreement with the corresponding air temperatures.

Miscible Oil in the Reduction of Dust Concentrations.—Tests were carried out in Cessnock No. 1 Colliery (Northern Field) to determine the efficacy for reducing dust concentrations of a miscible oil made by Mr. R. A. Harris, of Sydney. These tests were taken during mechanical loading and cutting, and comparison was made between the dust concentrations whilst using water as the spraying liquid and whilst similarly using the miscible oil diluted with water to a strength of one part in eighty. Though the comparative tests during loading and during cutting were each made in the same place, it was considered necessary to correct the counts, as far as practicable, for variation in air flow and for dust already in suspension in the air stream. The quantity of liquid sprayed, whether water or oil-water emulsion, was carefully measured and the rate found to be practically constant.

The average rise in dust concentration during cutting was 23 particles per cubic centimeter by Owens' dust counter when spraying water and 67 particles per cubic centimetre when spraying oil-emulsion. Similarly, the average rise in dust concentration during loading was 45 particles per cubic centimetre when using water and 47 particles per cubic centimetre when using oil-water mixture. Neither of these differences was statistically significant.

Mechanisation and Dust Concentrations.—Tests were also taken in association with the Joint Coal Board during the operation of the Joy Continuous Miner in Newstan Colliery, near Fassifern, on the Northern Coalfield. Dust concentrations near the machinemen were satisfactory, provided air flows over seven or eight thousand cubic feet per minute were maintained. With lower air flows (e.g., 2,500 cubic feet per minute) average dust concentrations exceeding 1,000 particles per cubic centimetre (Owens') were obtained. The generated dust clouds appeared to be rapidly diluted by the ventilating air stream and dust concentrations fifty or more yards on the return side of the machine were under 200 particles per cubic centimetre by Owens' dust counter.

Tunnelling, Metalliferous Mining and Quarrying.

Kemira Tunnel.—Towards the end of the year a preliminary examination was made of the Kemira Tunnel. This tunnel is being driven from the coastal plain south of Wollongong into the Illawarra Coast Range for a distance of about 15,000 ft. to intersect the workings of Mount Keira and Mount Kembla Collieries. It will be used for the rapid transportation of machine-won coal from these mines and will avoid rises of several hundred feet along the horizon of the seam of the usual tunnel mouths.

At the time of test the face was nearly 5,700 feet from the portal and the tunnel was being driven through dolerite. The average dust concentration at the face was 340 particles per cubic centimetre by Owens' dust counter. Since nearly half the total ventilating air (8,500 cubic feet per minute) was being recirculated, it is probable that ventilating difficulties will increase as the tunnel advances. It is, therefore, intended to retest this tunnel on future occasions.

Granite.—An investigation carried out in the Public Works Department's granite quarry, at Moruya, on the South Coast, revealed high dust concentrations (1,520 particles per cubic centimetre by Owens' dust counter) when dry drilling on the quarry floor. Since wet drilling substantially reduces the life of the drills used in this work, an exhaust hood placed near the collar of the hole and operated by air aspiration was recommended.

Quartzite.—At a quartzite quarry situated at Lake Conjola there was no mechanisation and all work was carried out manually. Average dust concentrations were highest during "barring down", i.e., when levering quartzite boulders from the face on to the floor for subsequent loading. Sometimes the average exceeded the permitted legal standard of 200 particles per cubic centimetre by Owens' dust counter. To reduce the possibility of excessively dusty conditions, it was suggested that the quartzite be hosed with water before handling, particularly before barring down.

Sandstone Excavating.—At the request of the Chief Inspector of Scaffolding and Lifts, Department of Labour and Industry and Social Welfare, an investigation was made of dust exposure of men engaged in cutting a circulating channel through sandstone at the Bunnerong Power Station with a Siskol Channelling Machine. The work consisted of driving a channel, 6 feet x 4 feet for a length of about 125 feet, of which approximately 36 feet had been taken out.

Although a copious supply of water was directed on to the cut, mechanical ventilation was not provided, and natural ventilation was unsatisfactory.

The average dust concentration in the breathing zone of the machine operator exceeded 10,000 particles per cubic centimetre (Owens' dust counter). Under such conditions there is a great danger of workmen developing a rapid silicosis and it was recommended that the work be discontinued until efficient ventilation as outlined was installed. Action was taken as recommended and work had not been resumed by the end of the year.

Our experience has shown that, with suitable ventilation, the dust generated by the Siskol Channelling Machine can be effectively controlled.

Asbestos.

Manufacture of Asbestos Lagging.—During the year an inspection was made of a factory engaged in the manufacture of asbestos lagging. During this process diatomaceous earth and china clay are milled and bagged, and asbestos is disintegrated and subsequently bagged. Finally, a certain proportion of all three ingredients are mixed, the final product being bagged and transported elsewhere for processing.

In this factory mechanical ventilation was not provided to remove the dust at the point of origin. Dust counts taken

at the breathing zone of the worker were 10,000 particles per cubic centimetre for diatomaceous earth and china clay, and 500 million particles per cubic foot for asbestos. The china clay used has a free silica content of approximately 18.25 per cent. Atmospheric concentrations conducive to safe working conditions for china clay of such a free silica content should not exceed 400 particles per cubic centimetre. With diatomaceous earth the position is more complicated, but it is reasonable to expect that the atmospheric contamination should not exceed the above level. Even with inert dusts there is a nuisance level above 1,800 particles per cubic centimetre. The recommended maximum allowable atmospheric concentration for asbestos is 5,000,000 particles per cubic foot.

Two employees of this factory in the past have developed a pneumoconiosis, probably a mixed silicosis and asbestosis. The latest employee examined has been at this job for five years and radiologically shows some evidence suspicious of early asbestosis.

The factory is small and employs a staff of two or three only. The reason why more have not been affected is the labour turnover and the difficulty of obtaining staff because of the obviously poor conditions.

In this case the building is unsuitable, the plant design is crude, protective devices other than masks are ineffective, and the only remedy appears to be a completely new plant and premises. Unfortunately this material is of the utmost priority in industry, including power stations now under construction, and hardship would be involved if these measures were carried out. As a temporary expedient adequate exhaust ventilation will be insisted upon, together with frequent medical examinations of the employees exposed.

There is good reason to believe that similar conditions exist in other firms using asbestos, and it is intended in the coming year to make a short survey of all such factories.

Handling of Bulk Wheat.

At the I.L.O. Conference on Pneumoconiosis held at Sydney in February, 1950, it was recommended that the I.L.O. should take steps to inquire into the possibility of controlling the grain dust associated with the handling of cereal cargoes. In May, fourteen foremen stevedores were examined by the Division with respect to the possibility of pulmonary incapacity from this cause. These employees are engaged in the supervision of loading of bulk wheat in the holds by the stevedores, and their exposure would be greatest among those working on the waterfront. Their duties are concerned mainly with the supervision of the mechanical trimmer, but all were previously wharf labourers with experience in hand trimming. The only protective devices used are either a butter muslin pad over the mouth or a stocking over the head. The efficiency of these masks varied from 4 to 18 per cent., and only the largest particles (200 microns or above) were blocked entirely.

Tests taken by the Owens' jet dust counter indicated that mechanical trimming was approximately twice as dusty as hand trimming. Table VIII gives an indication of the results obtained and also some idea of the exposure to particles below 10 microns in diameter.

TABLE VIII.
Dust Tests Bulk Wheat Handling.

	No. of Tests Taken.	Average Dust Count (particles per c.c.).	Highest Single Count (particles per c.c.).
Mechanical	18	439	1,092
Trimming	8	556	693
Hand trimming	9	216	294

Of those examined the gross exposure to bulk wheat dust varied from two to twenty-four years, with a mean exposure of 5.4 years. The work is intermittent and it is difficult to estimate the actual exposure time, but it would vary from a minimum of ten hours to a maximum of twenty-five hours per week. No analysis for free silica was carried out.

There were no cases of pneumoconiosis, and the only radiological abnormalities were two cases showing apical healed tuberculous lesions. There was some evidence of upper respiratory tract irritation. Allergic rhinitis and sneezing was complained of in four instances, and tightness of the chest and wheezing in three cases. Seven employees complained of cough with sputum disappearing after cessation of this work, and complaints of sore eyes were common. In two cases a very clear history of asthma occurring with this exposure and disappearing when exposure ceased was obtained.

There is a need of more efficient respiratory protection for these workers, and it is intended in the coming year to experiment with various masks, including, it is hoped, the Scandia Air Veil Protector.

The Influence of Dust Inhalation on Chronic Respiratory Infections among Power Station and Gas Employees.

During the year a survey was commenced to determine and evaluate the medical industrial hazard associated with the distribution and production of coal gas in New South Wales. This investigation arose out of a request by the Royal Commission of Inquiry into the Gas Industry, held in 1948. During this Commission concern was expressed by the employees' representative as to the hazardous effects of prolonged inhalation of coal and coke dust, not only as regards the possible production of pneumoconiosis, but also as to its part in the etiology of non-specific chronic respiratory infections, such as chronic bronchitis, sinusitis, etc. Up to date a survey has been completed of one gas production unit. In June, 1950, an identical request was received with respect to the effects of dust inhalation on employees of a metropolitan power station. In this instance medical examinations, including X-rays of the chest, were carried out on eleven employees, selected with respect to duration of exposure and type of occupation, as those most likely to show medical disability from this cause.

The results of both these surveys have been combined in this preliminary report. It is intended to carry the survey of the gas industry into several other production units, and ultimately it is hoped that several hundred employees will have been examined.

There is a great similarity between both occupational groups. In each case employees are exposed to coal and coke dust and fly ash. The two groups differ from each other in their exposure to temperature extremes, this aspect being most prominent among the gas employees. In both groups the same standards were applied as regards atmospheric dust sampling and free silica determination.

In the medical survey the diagnosis of chronic bronchitis was not made unless the following criteria were satisfied:—

- (a) A history of onset from an acute attack or a history of previous respiratory infections such as pneumonia, sinusitis, recurrent colds, etc.
- (b) Either periodicity of cough, or chronicity of recurrences especially in winter.
- (c) The presence of sputum with muco-purulent properties either worse at night or in the mornings.
- (d) The elimination by X-ray of tuberculosis and pneumoconiosis or other specific lung diseases.

All cases not satisfying the above criteria were classified as chronic cough. No cases of early morning cough associated with smoking are included in this category. Where sinusitis was associated with bronchitis or with chronic cough, it was considered to be part of the syndrome and not classified separately. Chronic sinusitis was diagnosed clinically and any doubtful cases supported by X-ray evidence. Included also in this category were all cases of chronic post-nasal discharge.

Acute respiratory infections were not included in this survey in which all emphasis was on chronic respiratory diseases. Also eliminated were all conditions obviously not due to dust exposure, such as various types of deafness, deflected nasal septa, congenital abnormalities, etc.

In view of a recent article by Dunner, Hardy and Bagnall that sulphur dioxide inhalation may play a part in the determination of pulmonary dust disease in firemen, sampling of the atmosphere was carried out in both units at all points where it might be expected that the gas would be liberated. No trace of sulphur dioxide was detected. Similarly tests for carbon monoxide were negative at the metropolitan power station and in no case was the concentration greater than 100 parts per million at the gas production unit.

Dust exposure throughout both units was below 700 particles per cubic centimetre, except during coke discharging at the gas works where the counts varied from 1,000 to 1,800 particles per cubic centimetre. Exposure to this last process is intermittent, approximating about one hour per day. Chemical analyses indicated that the samples of atmospheric dust contained approximately 60 per cent. of total silica with a free content of less than 5 per cent.

Fifty-two employees were examined with a mean age of 44.5 years and a mean occupational exposure of 11.4 years. One case of pneumoconiosis due to free silica was discovered, but this man had worked for only six weeks at the Gas Company and prior to that for thirty-five years as a rock miner. This case was rejected for purposes of the survey. Two cases gave a definite history of onset of chronic bronchitis prior to this type of employment with periodicity of attacks up to the time of the survey. These were also rejected. As a result, forty-nine employees were left in whom any respiratory con-

dition present had developed during their employment in either of these two units. The mean age of this group was 44.3 years and the mean duration of occupation 11.3 years.

Results of Medical Survey.

Out of forty-nine employees examined eighteen were found to be suffering from respiratory infections, a gross rate per 100 of 36.9. No cases of pneumoconiosis or tuberculosis were discovered. Table IX indicates the numbers and rate per 100 of each type of respiratory infection.

TABLE IX.

Respiratory Disabilities Firemen and Gas Workers.

Type of Infection.	Number with Condition.	Rate per 100 Examined.
Pneumoconiosis	Nil	Nil
Chronic bronchitis	5	12.25
Chronic cough	7	14.35
All pulmonary conditions	12	26.6
Sinusitis	4	8.2
Rhinitis.....	2	4.1
Total respiratory infections	18	36.9

Both these rates compare unfavourably with those found in American workers in 1926 by Britten and Thompson.

TABLE XI.—Showing the Pathological Findings and Chemical Analysis of the Lung Specimens of five (5) Coal Mine Workers examined in the year 1950.

Case No.	Age.	Pathology.	Milligrammes per gramme of dried lung.					Content of Lungs (grammes).				Remarks.
			Ash.	Free and Combined Silica.	Combined Silica.	Free Silica.	Carbon.	Free and Combined Silica.	Combined Silica.	Free Silica.	Carbon.	
COAL MINE WORKERS—NEW SOUTH WALES—SOUTHERN COALFIELDS.												
259	60	No evidence of pneumoconiosis ...	19.8	1.1	0.5	0.6	6.0	0.245	0.095	0.15	1.14	South Bulli Colliery—28 years. Industrial history not forwarded.
260	40	Commencing very early pneumoconiosis.	21.7	3.3	1.7	1.6	17.0	0.91	0.47	0.44	4.7	
261	70	A few small nodules present—pneumoconiosis—coal dust type—early.	36.0	3.7	1.9	1.8	43.0	0.72	0.37	0.35	8.3	Mining 40 years. Ceased 1943. Mt. Keira Colliery.
COAL MINE WORKERS—NEW SOUTH WALES—NORTHERN COALFIELDS.												
262	54	A few small nodules associated with a small amount of emphysema—early pneumoconiosis—coal dust type.	25.7	3.3	1.1	2.2	23.0	0.64	0.21	0.43	4.46	Scotland to 1920. Then shiftman and contract miner—Bellbird Colliery.
263	64	Some black pigmentation—no nodulation. Grey hepatisation right lower lobe.	*	*	*	*	*	*	*	*	*	Durham, England, to 1923. Then Richmond Main Colliery.

* Chemical analysis not yet available.

Ventilation and Lighting.

Ultra-Violet Rays.—The shortage of building materials and labour in New South has led to the necessity of provision of prefabricated aluminium schools. These units are being erected largely in seaside suburbs because of the density of the population in those areas. As delivered, the side walls are covered with a non-reflecting coat, but the roof units are composed of polished aluminium. This substance is a good reflecting surface for both ultra-violet and infra-red rays, the glare from which is intensified by the comparative lack of tall vegetation in the sandy seaside soils, combined with the natural glare from the white sand. The attention of the Division was drawn to the occurrence of conjunctivitis in those erecting these prefabricated schools, and the nature of this unusual disturbance, occurring as it does some hours after ceasing work, strongly suggested the possibility of mild ultra-violet trauma. An inspection was made of this process and tests were carried out with various lenses. The intensity of the glare was so great that it required a dark lens (American Standards Specification No. 3 and 4) before relief was obtained. It was thought at first that these lenses might give an image too dark to allow of safe and accurate working. However,

TABLE X.
Respiratory Infections New South Wales and American Groups

	Rates per 100 N.S.W. Examined.	American Rates 1926.
Total respiratory infections	36.9	8.6
Bronchitis.....	12.25	4.5

The number of employees examined at present is small and a strict statistical comparison cannot be made with the American rates, where 10,000 employees were surveyed. Furthermore, the mean age of the group examined in New South Wales is high and the incidence of respiratory disease would be greater in the older age groups. It is hoped to carry this report further when several hundred employees have been surveyed and it is then intended to dissect out figures obtained with respect to age and occupational exposure. At present all that one can say is that there does appear to be a higher incidence of chronic respiratory disease in these employees than one would expect, but this yet may prove to be a statistical fallacy.

Post-Mortem Examinations of Miners.

The results of pathological and chemical analyses of the lungs of coal miners submitted to the Division for examination are given in detail in Table XI.

practical tests showed that there was sufficient definition to allow safe climbing of ladders and scaffolds and to see clearly for the insertion of nails and bolts.

The possibility of deleterious effects on the eyes of children looking down from multi-storied buildings on to these roof surfaces should be borne in mind.

X-rays and Radio Active Substances.—Sixteen members were examined in 1950, mainly routine examination of luminisers and industrial X-Ray technicians, but in no instance were any ill effects observed.

Caisson Workers and Divers.—Five divers were examined on a total of thirteen occasions for medical fitness during the year. One was found to no longer conform to the usual requirements.

Constitutional Factors—Allergy.—There have been several articles written recently on wood allergy. There was one case of asthma as an allergic phenomenon to Canadian cedar investigated at the Division during the year. The employee was a Venetian blind worker.

G. SCHOOL MEDICAL SERVICE.

ANNUAL REPORT.

As at the end of 1950 the effective staff of the school medical service consisted of:—

- Twenty-three full-time Medical Officers (including the Director, Deputy-Director and four Psychiatrists).
- One part-time Ear, Nose and Throat Specialist.
- One part-time Medical Officer attached to Newcastle Teachers' College.
- One half-time School Medical Officer.
- Fourteen School Nurses.
- One Speech Therapist.

The establishment provided for twenty-nine full-time medical officers.

Four psychologists and four social workers were seconded from the Education Department and attached to the four child guidance clinics. Four medical officers were attached as Lecturers in Hygiene and carried out the medical supervision of students at Sydney, Balmain, Armidale and Wagga Teachers' Colleges.

In the course of the medical inspection of schools in metropolitan and country districts during the year, 93,269 children were medically examined (73,718 full examinations and 19,551 review or partial examinations).

The duties of the school nurses comprised, as usual, mainly preparatory and follow-up work in connection with the medical inspection of metropolitan schools. They also assisted in the ascertainment of hearing defects in children (audiometric testing), and in anthropometric surveys.

The medical examination of applicants for entrance to the teaching service and the Teachers' Colleges, as well as teachers for sick leave, retirement purposes, etc., was undertaken as in former years.

The four Child Guidance Clinics continued to carry out the examination and investigation of children referred by parents, the Education Department, Child Welfare Department, Children's Court, and other bodies or authorities. The No. 3 Clinic, however, devoted its whole time to the examination of boys admitted to the Metropolitan Boys' Shelter and Yasmarr Hostel.

As in former years, the School Medical Service undertook also the medical examination of children referred for special reasons by the Child Welfare Department, Widows' Pensions Branch and the Education Department.

The School Medical Service continued also to be responsible for the health supervision of the pupils at the Glenfield Special School, a medical officer having paid regular visits to the school for this purpose.

The services of a part-time Speech Therapist only were available for the greater part of the year, but treatment was provided for children suffering from speech defects in some schools and at the Blackfriars Child Guidance Clinic centre.

Hearing survey clinic.—A part-time ear, nose and throat specialist was appointed at the beginning of the year to advise and assist in that section of the School Medical Service activities concerned with the ascertainment, investigation and general supervision of children suffering from deafness. Hearing surveys have been conducted in metropolitan and country districts, and particular attention has also been given to children in the Departmental opportunity deaf classes. An otological examination of all significant cases is made. Close collaboration is maintained with the Education Department in this work and especially in the matter of determining the educational requirements or problems of any particular child.

Children are referred when necessary for treatment, and where the use of a hearing aid is indicated, are referred to the Commonwealth Acoustic Laboratory.

Asthma survey.—Steps were taken this year to give advice to parents of children suffering from asthma in the effective treatment of colds and thus the control of the chronic nasal condition from which these children suffer. The results observed in the great majority of these asthmatic children, who were kept under strict supervision, leave no doubt as to the important part played by colds in their ill-health, and the good results that can be obtained by bringing these colds under control.

Bush Nursing Association.—In accordance with the arrangement which has been in existence for a number of years, bush nurses have continued to act in the capacity of school nurses in schools at or near the Bush Nursing Centre. They give health talks to the pupils and carry out a limited inspection for the detection of defects or unhygienic conditions.

New South Wales Society for Crippled Children.—Assistance is rendered to this society in various ways, including notification of physically handicapped children and examination of children in their special schools.

Far West Children's Health Scheme and Stewart House Preventorium.—Reference of suitable cases to these bodies was continued throughout the year.

H. DIVISION OF DENTAL SERVICES.

ANNUAL REPORT, 1950.

The dental services of the Department of Public Health include the School Dental Service, and services to State hospitals and homes and other institutions, including State penitentiaries.

The complete establishment is—

- Director of Dental Services, 1.
- Dental Officers, 21.
- Senior Dental Assistant, 1.
- Dental Assistants, 11.

School Dental Service.

At the commencement of the year there were eleven dental officers and eight dental assistants. During the year five dental officers and two dental assistants were appointed to fill vacancies. One dental officer retired, and one dental officer and two dental assistants resigned. One dental officer was on leave for six months.

The travelling school dental clinics working in both city and country districts examined 20,358 children. Of these 7.77 per cent. were found to have naturally sound mouths, whilst an additional 19.22 per cent. were found to have sound mouths as a result of treatment. 73.01 per cent. were in need of treatment.

The clinics treated 12,446 children; 26,572 teeth were extracted; 17,886 permanent fillings and 20,178 other treatments were provided.

Dental treatment was also carried out at the Out-patients' Department of the Royal Alexandra Hospital for Children, the Far West Children's Annual Camp at Manly, and the Glenfield Special School.

Further consideration was given to the provision of a more adequate dental service by the appointment and training of dental hygienists on lines similar to those in operation in New Zealand.

Dental Services to State Hospitals and Homes.

The dental work in these institutions was being carried out by part-time dental practitioners. During the year two permanent full-time officers were appointed. These provide an improved service for Parramatta, Callan Park, Gladesville and Rydalmere Mental Hospitals. Part-time dentists are still employed in the other institutions.

Further progress has been made in providing improved accommodation and modern equipment.

Dental Services in State Penitentiaries.

The services in this section have been improved by the appointment of a permanent dental officer with headquarters at Long Bay. This officer will visit other penitentiaries and training centres periodically.

Improved accommodation and modern equipment are being provided.

SECTION II.

MEDICAL OFFICER OF HEALTH.

REPORT OF THE METROPOLITAN MEDICAL OFFICER OF HEALTH FOR THE YEAR 1950.

Metropolitan Health District.

J. GRAHAM DREW, M.A., M.B., B.Ch. (Camb.), M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H., D.T.M., D.T.H. (Syd.), F.R.San.I.

To the Director-General of Public Health,
Sir,

I have the honour to present my report on the state of the public health in the metropolitan area of New South Wales for the year 1950.

It is unfortunate that owing to the delay in the publication of the relevant statistics it is impossible to present a comprehensive report together with an expression of views on trends of diseases and their possible causes.

Within the metropolitan area there are thirty (30) municipalities and two (2) shires with a population of 1,736,510.

Births numbered 33,432.

Birth rate, 19.54.

Ratio of male to female births, 106.

Ex-nuptial births, 1,465.

Stillbirths, 639.

Death rate, 10.33. Deaths, 17,679.

Infantile mortality:—

Deaths under 1 week, 525; Rate per 1,000 live births, 15.70.

Deaths under 1 month, 599; Rate per 1,000 live births, 17.92.

Deaths under 1 year, 849; Rate per 1,000 live births, 25.39.

Maternal Mortality: Total natural deaths, 28. Rate per 1,000 live births, .84.

The year 1950 was marked by excessive rainfall, causing considerable dislocation of the sanitary services in the outer suburbs where sewers have not yet been constructed. Sanitary depots became waterlogged and for a time no services were given to many ratepayers. The position was made much worse by acts of indiscipline on the part of the sanitary workers. As an outcome several councils such as Bankstown, Warringah Shire, Ryde and Holroyd have been pressed to operate their respective sanitary services on the day labour principle and to hasten on with the construction of sanitary dumps into the sewer.

It is pleasing to note that in spite of the foregoing dislocation there has not been any marked outbreak of intestinal disease, only six cases of typhoid fever having been reported.

The heavy rains also caused considerable discomfort in houses with leaking roofs, damp walls, etc. Although Municipal Health Inspectors have in all cases served the legal orders to repair and are prepared to prosecute, supplies of roofing materials were not to be had in sufficient amounts to meet the urgent demands. Unfortunate citizens felt that the Department was failing in its duty, and were not at all satisfied with the explanation that their misfortunes were a reflection of the national "go slow" outlook.

Advantage was taken of every occasion of addressing industrial groups of the necessity of thinking of and working for one another's comfort and of the value of united effort in raising the standard of health.

Although the Housing Commission is endeavouring to get on with a huge housing programme, considerable dissatisfaction has been expressed by the Health Department at the failure of the Commission to plan for the sanitary drainage of the new estates. As a result, from time to time, this Division is inundated with indignant complaints from the new tenants as to the insanitary conditions in which they are forced to live.

By courtesy of the new Minister for Housing, the Hon. C. A. Kelly, until recently Minister for Health, important talks took place between the Chairman of the Housing Commission, the Under Secretary, Department of Public Health, the President of the Metropolitan Water, Sewerage and Drainage Board, and myself. As a result of these talks, it is hoped that the fullest consideration will be given to the disposal of household drainage from housing estates in unsewered areas.

Control of Dangerous Substances.

Acting on information received, an investigation was made of an area surrounding a large chemical works at Rhodes. It was found that practically all vegetation within half a

mile of the factory was wilting or had withered. The cause was subsequently traced to a leakage in the plant for making a hormone weedicide. To obviate any further discharges from leaks, etc., small collections of water were placed throughout the plant. These were collected at regular intervals and used to moisten cotton wool in tubes, into each one of which, a cucumber seed was placed. The rate of germination and growth demonstrated the amount (if any) of weedicide present in the atmosphere.

Parathion.

As a result of investigation which showed that parathion and other insecticides of this type can now be freely purchased, an expert committee was formed consisting of officers of the Departments of Agriculture, Labour and Industry and Health (Government Analyst, Director of Industrial Hygiene and the Metropolitan Medical Officer of Health).

Later the problem was dealt with by the Federal Government. Meanwhile in New South Wales, the Under Secretary, Department of Agriculture, will deal with applications for registration of pesticides, insecticides, raticides, etc., under the powers conferred on him by the Pest Destroyers' Act, so that some measure of control may be exercised.

Infectious Diseases.

Poliomyelitis.—Three hundred and eighty-five cases were reported. These occurred in fairly regular numbers over the year with no area specially marked out. The attack rate per 10,000 population was two. The deaths numbered twenty. This disease is reported on in another portion of the New South Wales Annual Health Report.

Scarlet Fever.—Five hundred and two cases, nil deaths. The disease remains mild.

Diphtheria.—One hundred and sixty-two cases, nine deaths. Number of immunised children proved by virulence test to have contracted diphtheria was three, one of whom died.

Enteric Fever.—Six cases, one death.

Cerebro-spinal Meningitis.—Fifty-five cases, twenty-two deaths.

Typhus Fever.—Six cases, one death.

Rat eradication campaigns are continually in operation and more councils are realising the necessity for maintaining rat eradicators on the strength of the local health department.

Tuberculosis.—444 deaths.

The fullest assistance possible is given by local health staffs to the Division of Tuberculosis towards eradicating conditions which favour the spread of the disease.

Venereal Diseases.—There has been a striking decrease in both syphilis and gonorrhoea, probably due to the use of penicillin and the sulpha drugs.

Causes of Death and Comments.

Heart disease continues to be the chief cause of death with 6,248, i.e., 3,651 per million of the mean population. Cancer is next with 2,431 deaths, i.e., 1,421 per 1,000,000. Vascular lesions affecting the central nervous system is next with 2,291 deaths, i.e., 1,339 per million of the mean population.

Health Week.

A most successful Health Week was held in Sydney from the 20th-27th October. Under the slogan "Clean Bowl Disease" a concerted drive was made towards raising the standards for handling food with hygiene in the kitchen, restaurant, etc.

The week was opened by the Federal Minister of Health, the Rt. Hon. Sir Earle Page, by means of two radio broadcasts on a national basis as all States of the Commonwealth acted in collaboration.

Metropolitan Councils.

Visits were paid according to routine or for the purpose of special inspections or enquiries. It is pleasing to note that there is a progressively greater interest being given to their respective municipal health departments by the aldermen concerned, but there is still room for great improvement.

HUNTER RIVER HEALTH DISTRICT.

Report of the Medical Officers of Health for the Hunter River Health District for the Year Ended 31st December, 1950.

Staff.

Medical Officer of Health.—Dr. J. R. Shannon.
One Senior Health Inspector.
One Senior Inspector—Pure Food.
One Supervisory Nurse.
One Tuberculosis Nurse.
One Office Assistant.

The District.

Comprises five municipalities and four shires together with the Harbour of Port Hunter.

Vital Statistics, 1950.

Population.—The population of the district at 31st December, 1950, was estimated at 269,750, while the estimated mean population for 1950 was 265,750.
Marriages.—During 1950, 2,547 marriages were celebrated in the district, equal to a rate of 9.58 per 1,000 of mean population.

Live Births.—There were 5,883 live births to mothers resident in the district, equivalent to a rate of 22.14 per 1,000 of mean population. Of these, 3,028 were males and 2,855 females.
Ex-nuptial Live Births.—These numbered 149, equivalent to a rate of 0.56 per 1,000 of mean population. The ex-nuptial live births represented 2.53 per cent. of the total live births.
Deaths.—Deaths of residents numbered 2,560, equivalent to a rate of 9.63 per 1,000 of mean population. Of these, 1,451 were males and 1,109 females.
Infantile Mortality.—Deaths under 1 year of age numbered 174, equivalent to a rate of 29.58 per 1,000 live births. Of the total number of deaths of infants under 1 year of age, 99 or 56.90 per cent. occurred within one week of birth and 112 or 64.37 per cent. within the first month. The corresponding rates per 1,000 live births for the two age groups were 16.83 and 19.04 respectively.
Still Births.—There were 105 still births to mothers resident in the district, equal to a rate of 0.40 per 1,000 of mean population and representing 1.75 per cent. of all births (live and still).

HUNTER RIVER HEALTH DISTRICT.
Marriages, Live Births, Stillbirths and Deaths—Each Local Government Area, 1950.

Municipality or Shire.	Area, 31st December, 1950.	Estimated Population.		Marr- riages.	Live Births.						Deaths.												Stillbirths.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
		31st Dec., 1950.	Mean 1950.		Total.			Ex- Nuptial.			All Ages.			Under 1 year.			Under 1 month.			Under 1 week.			Total.			Ex- Nuptial.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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Causes of Death of Infants under one year of age, 1950.

Inter-national Code No.	Cause of Death.*	Number of Deaths.			Inter-national Code No.	Cause of Death.*	Number of Deaths.		
		Males.	Females.	Persons.			Males.	Females.	Persons.
048	Infective and Parasitic Diseases—								
	Unspecified forms of dysentery .....	...	1	1	7630	Pneumonia of newborn—			
283	Allergic, Endocrine System, Metabolic and Nutritional Diseases—				7635	Without mention of immaturity	3	1	4
	Active rickets .....	...	1	1	7694	With immaturity .....	...	1	1
340	Disorders of the Nervous System and Sense Organs—					Neonatal disorders arising from maternal toxæmia—			
	Meningitis, except meningococcal and tuberculous.	1	2	3	7695	Attributed to other or unspecified maternal toxæmia, without mention of immaturity.	...	1	1
473	Diseases of the Respiratory System—				7699	Attributed to “toxæmia of pregnancy” with immaturity.	...	1	1
	Acute tonsillitis .....	...	1	1		Attributed to other or unspecified maternal toxæmia, with immaturity.	...	1	1
490	Lobar pneumonia	1	...	1	7700	Erythroblastosis, without mention of nervous affection or immaturity.	2	...	2
491	Bronchopneumonia	3	8	11	7701	Kernicterus, without mention of immaturity.	1	...	1
493	Pncumonia, other and unspecified .....	...	2	2	7720	Nutritional maladjustment, without mention of immaturity.	4	...	4
500	Acute bronchitis	2	...	2		Ill-defined diseases peculiar to early infancy—			
526	Bronchiectasis	1	...	1	7730	Without mention of immaturity	3	...	3
570	Diseases of the Digestive System—				7735	With immaturity	2	3	5
	Intestinal obstruction, without mention of hernia.	...	1	1	774	Immaturity with mention of any other subsidiary condition.	1	...	1
571	Gastro-enteritis and colitis, execept ulcerative, age 4 weeks and over.	11	4	15	776	Immaturity unqualified	30	15	45
587	Diseases of pancreas .....	...	1	1	929	Accidents, Poisonings and Violence—			
750	Congenital Malformations—					Accidental drowning and submersion ...	1	...	1
	Monstrosity	1	1	2		All Causes	106	68	174
751	Spina bifida and meningocele	3	1	4					
752	Congenital hydrocephalus	2	1	3					
753	Other congenital malformations of nervous system and sense organs.	1	...	1					
754	Congenital malformations of circulatory system.	9	6	15					
	Congenital malformations of digestive system.	4	1	5					
59	Other and unspecified congenital malformations, not elsewhere classified.	...	2	2					
7600	Certain Diseases of Early Infancy—								
	Intracranial and spinal injury at birth—								
7605	Without mention of immaturity	6	7	13					
	With immaturity .....	...	1	1					
7610	Other injury at birth—								
	Without mention of immaturity	4	...	4					
7615	With immaturity	3	2	5					
7620	Postnatal asphyxia and atelectasis—								
	Without mention of immaturity	4	1	5					
7625	With immaturity	3	1	4					

* From 1st January, 1950, the Sixth Revision of the International Lists of Diseases and Causes of Death was adopted for classifying causes of death.

Infectious Diseases.

Diphtheria.—Forty-four cases (three deaths) were notified during the year; compared with 100 cases (two deaths) in 1949.

Scarlet Fever.—Fifty-three cases were notified in 1950 compared with 160 cases in 1949.

Typhoid Fever.—Four cases notified during the year compared with one case in 1949.

Encephalitis Lethargica.—No cases notified.

Infantile Paralysis.—Ninety-five cases (eight deaths) were notified during the year compared with ten cases (one death) in 1949.

Cerebro-spinal Meningitis.—Seven cases were notified during the year compared with six cases in 1949.

Puerperal Infection.—One case was notified during 1950, and one case was notified in 1949.

Leprosy.—One case (one death) was notified during the year, and one case was notified in 1949.

Pulmonary Tuberculosis.—One hundred and twenty-two cases (twenty-five deaths) were notified during the year compared with 130 cases in 1949 and 110 cases in 1948.

Private Hospitals.

Number of Beds.—M. and S, 59; Lying-in, 50.

Number of Midwifery Nurses.—Number registered in 1950—Nil; visits of inspection made by nurse inspector—42.

Number of Attendances at Chest Clinic.—There were 8,793 attendances at the chest clinic in 1950 as compared with 1,996 in 1949. New patients in 1950 totalled 1,063, compared with 996 in 1949.

B.C.G. immunisation of the staff at Royal Newcastle Hospital was commenced late in 1949. In July, 1950, immunisation of child contacts was commenced. Twenty-eight children and fifty-nine staff members were immunised during the year.

General Notes.

Poliomyelitis.—The year opened with the threat of an outbreak of poliomyelitis. A campaign was undertaken by this office to make the medical, nursing and hospital services alert to the possibilities of the outbreak. A film, "Poliomyelitis, Diagnosis and Management", was obtained from the Federal Film Library and exhibited at all hospitals and to all medical practitioners.

Actually the disease did not assume epidemic form till October, though a few cases occurred during the earlier months. In October there were thirteen cases; in November, 41; in December, 37 cases occurred.

Tuberculosis.—Immunisation of persons found negative to the Mantoux Test was carried out by the Chest Clinic at Royal Newcastle Hospital during the year.

The State Director of Tuberculosis visited the district with a view to the implementation of an anti-tuberculosis campaign throughout the district, but the campaign did not get beyond the preliminary planning stage.

Typhus.—Two cases of Murine typhus occurred in the vicinity of a produce store in West Maitland. A previous case occurred in this neighbourhood in 1948. Vigorous anti-rodent measures were taken and no further case occurred.

Vaccination Against Smallpox.—The possibility of the advent of Variola major from overseas became evident in May. A survey was made of suitable buildings for use as vaccination centres, and in June the members of the health inspectorial staffs of the district councils were vaccinated together with the M.O.H. and staff.

Typhoid Fever (including Paratyphoid).—Two cases of typhoid fever, one fatal, were notified from a children's home in Newcastle. Rigid control of sanitation together with immunisation by T.A.B. prevented further cases. A member of the staff, who left the institution at the time of the first infection, was an intermittent carrier.

The third case for the year was that of a young woman who contracted the disease outside the area.

The fourth case was that of an infant of 15 months of age, who contracted Paratyphoid B. The source of infection remained a mystery. The infant was treated in her own home with Chloramphenicol and made an uninterrupted recovery.

Health Services in the District.

(a) *Public Hospitals*—eight.

	Beds
Royal Newcastle Hospital	278
Mater Misericordiae	219
Maitland District	158
Cessnock District	121
Wallsend District	106
Kurri Kurri District	95
Dangar Cottage (Singleton)	36
Convalescent Home (New Lambton)	35
Total Beds	1,062

(ii) *Maternity Hospital.*

Western Suburbs Maternity	98
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(iii) *Infectious Diseases Hospital.*

William Lynne Block, Newcastle	156
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(iv) *Mental Hospitals.*

Newcastle	291
North Stockton	952
Morisset	1,201
Total (Mental)	2,444

(v) *Sanatorium for Tuberculosis.*

"Rankin Park", New Lambton	102
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(vi) *Maternity Blocks in Public Hospitals.*

Kurri Kurri District	10
Cessnock	22
Maitland	30
Mater Misericordiae	20

(b) *Private Hospitals.*

Number	13
Beds—	
1 M. & S.	59
2 L.I.	50

(c) *Baby Health Centres.*

Newcastle Municipality—	
Full-time:	
Newcastle.	
Hamilton.	
Mayfield.	
Adamstown.	
New Lambton.	
Part-time:	
Carrington.	
Stockton.	
Mayfield West.	
Waratah.	
Wallsend.	
Municipality of Maitland—	
Full-time:	
Maitland.	
East Maitland.	
Municipality of Singleton—	
Full-time:	
Singleton.	
Shire of Port Stephens—	
Part-time:	
Raymond Terrace.	
Shire of Kearsley—	
Full-time:	
Cessnock.	
Kurri Kurri.	
Part-time:	
Abermain.	
Weston.	
Shire of Lake Macquarie—	
Part-time:	
Cardiff.	
Boolaroo.	
Toronto.	
West Wallsend.	
Swansea.	
Dora Creek.	

Total, ten full-time clinics, fourteen part-time clinics.

Water Usage.

The water supplied by the Hunter District Water Board during 1949, compared with year 1950, was drawn from the following sources:

	1949	1950
Chichester Storage Reservoir	3,590,491,000 galls.	3,618,553,000 galls.
Tomago Sand Beds	3,356,765,000 „	3,533,053,000 „
Walka Storage Reservoir	.....	.....
Nelson Bay.	3,572,000	24,888,000

Sewerage Service—Hunter District Water Board.

Forty-four thousand one hundred and sixty-eight premises are now connected to the Board's sewers, as compared with 42,838 in 1950. During 1950 the following new connections were made—

Newcastle Division	962
Maitland Division	225
Cessnock Division	143

As at the 30th June, 1950, the following properties were rated by the Board in respect of water supply, viz.:

Premises (connected)	61,998
Premises (not connected)	894
Lands (connected)	1,291
Lands (not connected)	13,650
Total Properties	77,833

Immunisation against Diphtheria in 1950.

A summary of the activities of the various clinics is given below:

	Children Immunised.
Newcastle Council Clinic	1,197
Royal Newcastle Hospital	not available
Cessnock Municipal Council	86
Maitland Municipal Clinic	130
Maitland Hospital Clinic	39
Singleton Municipal Clinic	no return
Kearsley Council Clinic	143
Lower Hunter Shire Clinic	—
Lake Macquarie Shire Clinic	—

Pure Food Act.

Particulars of work performed under the Pure Food Act, 1908-1944, for year ended 31st December, 1950 are shown hereunder:

This work includes inspection of food, supervision of all premises where food is prepared or sold, and compliance with the legal provisions as set out in the Act and Regulations.

Inspections of Premises totalled 890—two unclean premises, one breach Regulation 77.

Seizure and Destruction of Deteriorated Foods.—1 ton 11 cwt. 2 qrs. and 5,064 tins assorted foods.

Milk Samples.—One hundred and thirty-two samples submitted for analysis. Fifteen below standard.

Food Samples.—Two hundred and thirty samples submitted for analysis, twenty-one below standard.

Total Prosecutions.—Thirty-nine.

Total Fines and Costs.—£124 (Fines).

Local Government Act.

Nightsoil and garbage removal services were performed in a reasonably satisfactory manner. Complaints were received principally in regard to missed services. Depots were maintained in a satisfactory state. In Lake Macquarie shire it was found necessary to move towards acquisition of larger and more remote nightsoil depot sites. A survey was made of the shire and four localities selected, each to be serviced by one depot of extensive acreage.

Rapid development is occurring in the unsewered outskirts of the City of Newcastle, resulting in need for extension of scavenging services and creating problems in regard to sullage waste disposal.

Seventy-eight applications for septic tanks were approved during the year. Building activity in unsewered areas adjacent to Newcastle has resulted in numerous enquiries regarding suitability of sites for septic tank installation.

Coal companies have continued to carry out a policy of septic tank sewage in conjunction with improvements to miners' pit top amenities.

Unhealthy Building Land.

Sixty-one clearances were issued in respect of land which had been raised. One new area was notified during the year. The Department's surveyor proceeded with investigation of low-lying areas in Lake Macquarie shire.

Noxious Trades.

Thirty-four noxious trades were licensed.

A reasonable standard of repair and cleanliness was maintained and no complaints were received.

General Administration.

Mileage travelled by officers on duty—

Medical Officer of Health	2,546 miles.
Senior Health Inspector	7,000 „

SOUTH COAST HEALTH DISTRICT.

Report of the Medical Officer of Health, South Coast Health District for the year ended 31st December, 1950.

Staff.

Dr. A. J. GEOFFROY, M.B., Ch. M., D.P.H., D.T.M., D.T.H.,
Medical Officer of Health.

Mr. R. C. TURNER, *Senior Health Inspector.*

Miss A. P. GRAHAM, *Typiste-Stenographer.*

To the Director General of Public Health,

Sir,—I have the honour to present a report on the health conditions of the South Coast Health District for the year ended 31st December, 1950.

Staff Changes.

There were no staff changes during the year.

Local Authorities.

The South Coast Health District comprises thirteen municipalities and shires as stated hereunder:—

Municipalities.—Bowral, Camden, Campbelltown, Gerringong, Jamberoo, Kiama, Shellharbour, City of Greater Wollongong.

Shires.—Mittagong, Shoalhaven, Sutherland, Wingecarribee, Wollondilly.

Description.

The boundaries of the South Coast Health District extend in the north along the southern shores of the Georges River, westward to the Warragamba river where it joins the Mitchell Health District. The Pacific Ocean forms the eastern border of the district from the Georges River in the north to Durras Water in the south. The western border extends from the Main Dividing Range along the boundaries of the Wollondilly, Shoalhaven Shires to Currowan Creek.

The district is watered by the Shoalhaven, Clyde, Wollondilly, Wingecarribee and Nepean rivers. Within its boundaries are the catchment area of the Sydney Water Supply with dams and reservoirs at Nepean, Avon, Cataract and Cordeaux.

The coastal range separates the narrow coastal strip of land from the tablelands.

The Hume and Princes Highways traverse the district from north to south. Other important roads connecting the two highways are from Heathcote to Liverpool, from Bulli Pass through Appin to Camden, from Mount Keira to Picton and from Albion Park to Moss Vale and Bowral. Further south, the Nowra-Kangaroo Valley Road and the Nowra-Braidwood Road afford access from the coast to inland areas.

From Stanwell Park to Wollongong a scenic road of great beauty gives an alternate route to tourists visiting the South Coast.

The chief towns are the City of Greater Wollongong, Sutherland, Nowra, Bowral, Moss Vale, Camden, Campbelltown, Mittagong, Picton and Kiama. Many tourists resorts and places of interest are to be found within the district; the National Park, Lake Illawarra, Jervis Bay, the Kangaroo Valley, Burratorang Valley, and the Wombeyan Caves.

The South Coast Health District is a centre of the dairying and pastoral industries. The chief dairy cattle centres are in the Camden and Gerringong-Jamberoo districts, whilst the pastoral areas are mainly on the tablelands. From Coalcliff to Dapto coal mining is an important industry. Heavy industry is carried out in the Port Kembla district south of the City of Wollongong and has a most important bearing on the present and future development of the South Coast district.

Vital Statistics, 1950.

Population.—The population of the district at 31st December, 1950, was estimated at 181,920, while the estimated mean population for 1950 was 174,920.

Marriages.—During 1950, 1,204 marriages were celebrated in the district, equal to a rate of 6.88 per 1,000 of mean population.

Live Births.—There were 4,183 live births to mothers resident in the district, equivalent to a rate of 23.91 per 1,000 of mean population. Of these, 2,117 were males and 2,066 females.

Ex-Nuptial Live Births.—These numbered 153, equivalent to a rate of 0.87 per 1,000 of mean population. The ex-nuptial live births represented 3.66 per cent. of the total live births.

Deaths.—Deaths of residents numbered 1,506, equivalent to a rate of 8.60 per 1,000 of mean population. Of these, 914 were males and 591 females.

Infantile Mortality.—Deaths under 1 year of age numbered 105, equivalent to a rate of 25.10 per 1,000 live births.

Of the total number of death of infants under 1 year of age, sixty-three, or 60.00 per cent., occurred within one week of birth and eighty-one, or 77.14 per cent. within the first month. The corresponding rates per 1,000 live births for the two age groups were 15.06 and 19.36 respectively.

Still Births.—There were sixty-eight still births to mothers resident in the district, equal to a rate of 0.39 per 1,000 of mean population and representing 1.60 per cent. of all births (live and still).

SOUTH COAST HEALTH DISTRICT.
Marriages, Live Births, Stillbirths and Deaths—Each Local Government Area, 1950.

Municipality or Shire.	Area, 31st December, 1950.	Estimated Population.		Marr- riages.	Live Births.						Deaths.												Stillbirths.					
		31st Dec., 1950.	Mean 1950.		Total.			Ex- Nuptial.			All Ages.			Under 1 year.			Under 1 month.			Under 1 week.			Total.			Ex- Nuptial.		
					M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
	Acres.																											
Municipalities—																												
Bowral	3,234	3,930	3,880	44	44	39	83	7	5	12	19	16	35	2	1	3	2	...	2	2	...	2	1	1	2	1	...	1
Camden	50,929	4,390	4,340	40	30	30	60	1	1	2	23	13	36	2	1	3	2	1	3	1	...	1	...	...	...	...	...	...
Campbelltown ...	77,043	8,190	8,010	30	89	83	172	1	6	7	50	21	71	3	2	5	3	2	5	3	1	4	2	3	5	...	...	...
Gerrington	20,110	970	950	2	12	13	25	1	...	1	5	1	6	1	...	1	1	...	1	...	...	...	...	...	...	...	...	...
Jamberoo	40,468	970	970	7	11	7	18	...	...	...	4	3	7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Kiama	2,548	2,460	2,430	29	27	27	54	...	2	2	17	8	25	2	1	3	1	1	2	1	1	2	...	...	...	...	...	...
Shellharbour ...	38,244	4,210	4,040	13	41	42	83	2	4	6	16	10	26	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...
Wollongong, Greater	176,416	74,310	72,380	638	820	768	1,588	25	24	49	374	249	623	25	11	36	19	7	26	14	6	20	16	15	31	1	1	2
Shires—																												
Mittagong	369,225	5,710	5,670	17	43	44	87	2	3	5	26	21	47	1	3	4	1	3	4	1	1	2	...	1	1	...	...	...
Shoalhaven	1,151,573	14,520	14,260	122	201	195	396	12	10	22	88	53	141	8	3	11	6	3	9	4	3	7	3	4	7	...	...	...
Sutherland	91,520	44,450	40,800	207	615	592	1,207	15	23	38	193	126	319	11	14	25	10	11	21	8	10	18	11	4	15	...	1	1
Wingecarribee ...	340,754	8,210	8,010	37	75	90	165	2	3	5	43	29	72	3	1	4	2	...	2	1	...	1	3	...	3	...	...	...
Wollondilly	632,092	9,600	9,180	18	109	136	245	1	3	4	56	41	97	5	4	9	4	2	6	4	2	6	2	2	4	...	...	...
Total	2,994,156	181,920	174,920	1,204	2,117	2,066	4,183	69	84	153	914	591	1,505	63	42	105	51	30	81	39	24	63	38	30	68	2	2	4

Causes of Death of Infants under one year of age, 1950.

Inter- national Code No. *	Cause of Death.*	Number of Deaths.		
		Males.	Females.	Persons.
053	Inf ective and Parasitic Diseases—			
061	Septicaemia and pyaemia .....	...	1	1
	Tetanus.....	1	...	...
	Allergie, Endocrine System, Metabolic and Nutritional Diseases—			
253	Myxoedema and cretinism.....	1	...	1
273	Diseases of thymus gland	1	...	1
	Disorders of the Nervous System and Sense Organs—			
340	Meningitis, execept meningocoeal and tuberculous.	3	2	5
	Diseases of the Respiratory System—			
491	Bronchopneumonia .....	...	4	4
500	Aeute bronchitis	1	...	1
	Diseases of the Digestive System—			
539	Diseases of oesophagus .....	...	1	1
560	Hernia of abdominal eavity without mention of obstruction.	1	1	2
561	Hernia of abdominal eavity with obstruction.	1	...	1
571	Gastro-enteritis and eolitis, execept ulcerative, age 4 weeks and over.	1	1	2
	Diseases of the Genito-urinary System—			
600	Infections of kidney	1	...	1
	Diseases of the Skin and Cellular Tissue—			
705	Erythematous eonditions .....	...	1	1
	Congenital Malformations—			
751	Spina bifida and meningocele	2	2	4
754	Congenital malformations of circulatory system.	2	2	4
755	Cleft palate and hare lip	1	...	1
756	Congenital malformations of digestive system.	1	1	2
757	Congenital malformations of genito-urinary system.	1	...	1
759	Other and unspecified congenital mal- formations, not elsewhere classified.	1	3	4
	Certain Diseases of Early Infaney—			
7600	Intracranial and spinal injury at birth—			
	Without mention of immaturity	4	1	5
7605	With immaturity	1	2	3
7620	Postnatal asphyxia and atelectasis without mention of immaturity.	5	1	6
7630	Pneumonia of newborn, without mention of immaturity.	1	1	2
7690	Neonatal disorders attributed to "toxaemia of pregnancy" without mention of immaturity.	1	...	1
7700	Erythroblastosis, without mention of nervous affection or immaturity.	1	1	2
	Haemorrhagic disease of newborn—			
7710	Without mention of immaturity	3	...	3
7715	With immaturity	1	...	1
7720	Nutritional maladjustment, without mention of immaturity.	1	1	2
	Ill-defined diseases peculiar to early infaney—			
7730	Without mention of immaturity	1	1	2
7735	With immaturity	6	1	7
776	Immaturity unqualified	18	14	32
	Accidents, Poisonings and Violencee—			
931	Excessive heat and insolation	1	...	...
	All Causes	63	42	105

* From 1st January, 1950, the Sixth Revision of the International Lists of Diseases and Causes of Death was adopted for classifying causes of death.

Office Accommodation.

On the 29th September, 1950, the offices occupied by the South Coast Health District since its inception—January, 1946, were exchanged for offices occupied by the Housing Commission on the first floor of the building. The exchange was carried out at the request of the Housing Commission, and not this department. Negotiations to effect this exchange were carried on over a period of fifteen months.

During the month of October, necessary alterations including lighting, plumbing and painting of the new offices were carried out.

Notifiable Diseases.

There were 117 cases of infectious diseases notified for the year 1950, including 6 deaths, compared with ninety-three cases and three deaths in 1949.

Diphtheria.—Twenty-seven cases; 0 deaths—compared with 16 cases, and 2 deaths notified in 1949.

Scarlet Fever.—Forty cases;—compared with 65 cases in 1949.

Cerebro-spinal Meningitis.—Eleven cases; 5 deaths—compared with 5 cases and 1 death in 1949.

Poliomyelitis.—Thirty-nine cases; 1 death—compared with 6 cases in 1949.

Encephalitis Lethargica.—No cases—compared with 1 case in 1949.

Puerperal Fever.—No cases—compared with no cases in 1949.

Poliomyelitis.—There was a greater number of cases of poliomyelitis notified in this health district during the year 1950. This was to be expected as being part of the general increase in the number of cases notified in New South Wales. The incidence of poliomyelitis throughout the State reached epidemic proportions particularly towards the end of the year. In this district, quarterly notifications were as follows:—

January-March—11 cases.

April-June—9 cases.

July-September—12 cases.

October-December—7 cases.

It should be noted that seven cases of poliomyelitis occurring in the City of Greater Wollongong during December, 1950, were not notified to the Health Department in Wollongong till January, 1951.

Of the cases notified in this district, nineteen occurred in the shire of Sutherland and eight in the City of Greater Wollongong.

It will be seen that these two Local Government areas accounted for the majority of notified cases. Both areas are more densely populated than the rest of the district and being popular holiday resorts there is an influx of tourists from other parts of the State.

Diphtheria.—There would appear to be a large increase in the number of diphtheria cases notified. However, eleven cases occurred in the Local Government areas of Campbelltown and Sutherland from which areas infectious disease figures for the whole year were notified for the first time to this office since their amalgamation with the South Coast Health District.

Diphtheria Immunisation Campaigns.

A summary of the number of children immunised is shown in the following table:—

Council.	Number of Children immunised.	Number of Children receiving reinforcing doses.
City of Greater Wollongong ...	286	7
Shire of Sutherland.....	215	90
Municipality of Bowral	12	2
Municipality of Shellharbour	31	4
Total	544	103

In addition, thirty-one children received an initial injection but did not complete the full course.

The immunising agent used was P.T.A.P., except in the Shire of Sutherland, where Diphtheria Prophylactic (Formalinized Toxoid) was preferred.

Tuberculosis.

During the year 1950, eighty-two cases of tuberculosis were notified, as compared with forty-six cases in 1949. Of these, fifty-two cases, including sixteen deaths, occurred within the City of Greater Wollongong area.

The Anti-Tuberculosis Clinic established at the Wollongong District Hospital in October, 1949, has been operated most successfully. Dr. Marshall Andrew, Director of Tuberculosis, supervised the operation of the clinic throughout the year. Sister J. Booler was in charge of the clinic and carried out the district visiting. The establishment of the clinic has led to a thorough investigation of contacts and results in unsuspected cases of tuberculosis being diagnosed.

Number of attendances at Clinic—1,525.

Number of new cases—176.

Number of new contacts—259.

Number of old cases—165.

Number of old contacts—142.

Number of X-ray examinations—766.

Medical Examinations.

During the year 1950, sixty-five medical examinations were carried out at this office on behalf of the Public Service Board and Maritime Services Board.

Health Education.

Information on health matters was given to representatives of the press and other callers throughout the year.

Booklets and pamphlets on health were distributed on request to medical practitioners in the district and to many other persons.

Noxious Trades Act.

During the year sixty-three inspections of noxious trades premises were carried out.

Applications for licenses under the Noxious Trades Act, 1902-1944 were received:—

Pig-keepers	42
Fat-extractors	38
Poultry-farmers	7
Knackers	2
Gut-scrapers	2

During the year licenses for the trades of fat-extractor and pig-keeper were not recommended by the Board of Health in respect of premises occupied by Dorahy Bros., O'Briens-road, Figtree, Wollongong, owing to the premises not conforming

to the requirements of the regulations under the Act. Later in the year new buildings were erected and licenses were recommended for approval in connection with the premises.

Warnings were issued to licensees of other noxious trades premises to remedy unsatisfactory conditions and maintain their premises of all times in a clean condition in conformity with the requirements of the Act.

Water Supplies.

Three investigations of town water supplies were made during the year. Chemical and bacteriological samples of water were collected from two other water supplies and forwarded to the Government Analyst and Director of Pathological Laboratories for analysis and examination respectively. Appropriate advice on water supplies was given concerning supplies investigated.

Septic Tanks.

An increase in building activities in the South Coast Health District particularly in the City of Greater Wollongong and the Shire of Sutherland has resulted in a substantial increase in the number of applications for the installation of septic tanks. During the year 282 inspections of sites for proposed septic tanks were made compared with 186 in 1949. The increase in percentage being 51.6 per cent.

Technical advice regarding septic tank construction, disposal of effluent, etc., is frequently given to builders, architects and other persons. This has resulted in the plans of installations of septic tanks submitted to this office being more closely in accordance with departmental practice.

Four inspections of existing septic tanks were also made. Where necessary instructions were given by this office to abate nuisances arising out of defective conditions found to be present.

Sewerage.

The towns of Moss Vale, Bowral, Mittagong, Camden, Campbelltown and Nowra are sewered and also a small portion of the City of Wollongong. An extension of sewerage to West Wollongong—Port Kembla is proposed as part of a progressive programme, but this is dependent on the supply of labour and materials and the date of completion of this work has not yet been stated.

The site for a proposed sewerage treatment works at Kiama was chosen during the year by the Medical Officer of Health in association with the Public Works Department. Three inspections of existing sewerage treatment works were made by this office.

Nightsoil Disposal.

Eight inspections of existing nightsoil depots and seven inspections of land for proposed new nightsoil depot sites were made during the year.

New nightsoil depots at Cronulla, Bundeena, Shellharbour and Picton were inspected and recommended for approved by the Board of Health.

Investigations in connection with unsatisfactory rendering of sanitary services were carried out. Where necessary instructions were given to local authorities to cause the sanitary services to be rendered in accordance with the Local Government Ordinances.

Numerous complaints have been received concerning existing sanitary services at East Fairy Meadow and Bulli. Inspections have been made from time to time and the local authority urged to exercise a stricter control of these depots. This has resulted in a great improvement in the conditions. Negotiations have been carried out throughout the year with the local authority with a view to having both these sanitary depots closed for the disposal of nightsoil as the sites are not considered suitable and are a potential danger to health.

During the year temporary stoppages in the rendering of sanitary services have occurred in the City of Greater Wollongong, shires of Sutherland, Mittagong and Wingecarribee, and the municipality of Shellharbour.

On the 17th February, 1950, a strike of the sanitary carters of the Sutherland Shire Council occurred. A compulsory conference called at the Industrial Court, Sydney, was held on the same day, necessitating the attendance of both the Medical Officer of Health, and the Senior Health Inspector. An agreement was reached by the Sutherland Shire Council, the Transport Workers' Union and the sanitary carters. The men resumed work on the 20th February, 1950.

Garbage Disposal.

Eight inspections of existing garbage disposal depots were made during the year.

Several complaints of unsatisfactory disposal of garbage, rat infestations, flies and noxious odours were received, and attended to.

Complaints.

Many complaints were received during the year relative to alleged nuisances.

In many cases these were referred to the local authorities for immediate suitable action. Investigations were carried out by this office of sixty-four complaints. The complaints were chiefly made concerning insanitary buildings, dampness in buildings, etc., drainage nuisances, smoke nuisances, road nuisances, unsatisfactory sanitary and garbage services.

Pure Food Act.

Throughout the year, pure food inspectors from head office visited the South Coast Health District and conducted numerous inspections of food premises under the Pure Food Act, 1908. Many prosecutions arising out of these inspections were conducted and fines were imposed for breaches of the Act and Regulations.

Additional inspections of hotels and bakery premises were carried out by this office. A prosecution in connection with dirty bakery premises conducted by local authority necessitated attendance at court by a departmental officer on four separate occasions. The facts in this case were proved, but the defendant pleaded extenuating circumstances and the information was dismissed under section 556A of the Crimes Act.

Tourist Camps.

During the year twenty inspections of tourist camps were made. Where considered necessary recommendations were made to councils for the improvement of the camping areas. Generally the tourist camps were found to be satisfactory. Cases of infectious diseases notified as being present at the camps proved on investigation to have occurred in persons reported sick on arrival.

General.

There has been a noticeable increase in the number of persons calling at this office during the year for information and advice regarding health matters. There has also been a considerable increase in the work of the staff of this office. This has been largely due to the full effect being felt of the addition of the municipality of Campbelltown and the Sutherland Shire to the South Coast Health District. These areas were added in September, 1949.

The work in the Sutherland Shire has been heavy owing to the unsatisfactory condition of the sanitary service for most part of the year. This service, which is very large, frequently broke down and in consequence continuous complaints by householders were made to this Department. The building activity in the area also has been far ahead of council's road construction programme, and the season generally being wet, drainage complaints from the area were frequent and numerous.

Very similar conditions have existed in the City of Greater Wollongong area where the growth of the populated districts has extended on to low-lying areas, badly drained and without street formation. Nuisances have occurred and the drainage problems, being serious, have not been easy to remedy consequently there have been many complaints.

With the continued industrial development in the City of Greater Wollongong area and the popularity of the Sutherland Shire as a residential and tourist district, no diminution in the work of this office with regard to these areas is expected during 1951.

I would like to state my appreciation of the diligent services and co-operation of Mr. R. C. Turner, Senior Health Inspector, and Miss A. P. Graham, Typiste-Stenographer, throughout the year.

MITCHELL HEALTH DISTRICT.

Report of the Medical Officer of Health for the Year Ended 31st December, 1950.

Staff.

Medical Officer of Health, Dr. E. C. WALLACE; *Health Inspector*, Mr. D. H. WAY; *Office Assistant*, Miss P. M. SINGLE.

Owing to lack of housing accommodation at Bathurst approval was given for Dr. E. C. Wallace to visit the District on a part-time basis, with headquarters at Sydney.

The Mitchell Health District is made up of the following municipalities and shires:

Municipalities.

Bathurst.

Blue Mountains, City of.

Lithgow.

Molong.

Mudgee.

Orange.

Shires.

Abercrombie.

Amaroo.

Blaxland.

Canobolas.

Cudgegong.

Gulgong.

Lyndhurst.

Oberon.

Rylstone.

Turon.

Apart from open-cut mining, which is being developed on a large scale in the Blaxland Shire, there has been little change in the general activities carried on in the district as noted in the report for 1949.

*81687—7

Vital Statistics, 1950.

Population.—The population of the district at 31st December, 1950, was estimated at 129,080, while the estimated mean population for 1950 was 127,260.

Marriages.—During 1950, 1,041 marriages were celebrated in the district, equal to a rate of 8.18 per 1,000 of mean population.

Live Births.—There were 3,094 live births to mothers resident in the district, equivalent to a rate of 24.31 per 1,000 of mean population. Of these, 1,573 were males and 1,521 females.

Ex-nuptial Live Births.—These numbered 125, equivalent to a rate of 9.69 per 1,000 of mean population. The ex-nuptial live births represented 4.04 per cent. of the total live births.

Deaths.—The deaths of residents numbered 1,233, equivalent to a rate of 9.69 per 1,000 of mean population. Of these 725 were males and 508 females.

Infantile Mortality.—Deaths under 1 year of age numbered eighty-six, equivalent to a rate of 27.80 per 1,000 live births.

Of the total number of deaths of infants under one year of age, sixty-two, or 72.09 per cent., occurred within one week of birth, and sixty-seven, or 77.91 per cent., within the first month. The corresponding rates per 1,000 live births for the two age groups were 20.04 and 21.65 respectively.

Still Births.—There were sixty-seven still births to mothers resident in the district, equal to a rate of 0.53 per 1,000 of mean population and representing 2.12 per cent. of all births (live and still).

NOTE.—From 1st January, 1950, portion of the former Shire of Cobbora (namely "A" Riding) was amalgamated with Gulgong Shire.

MITCHELL HEALTH DISTRICT.
Marriages, Live Births, Stillbirths and Deaths—Each Local Government Area, 1950.

Municipality or Shire.	Area, 31st December, 1950.	Estimated Population.		Marr- riages.	Live Births.						Deaths.												Stillbirths.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
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* From 1st January, 1950, portion of the former Shire of Cobbora (namely "A" Riding) was amalgamated with Gulgong Shire.

Causes of Death of Infants under one year of age, 1950.

International Code No.	Cause of Death.*	Number of Deaths.		
		Males.	Females.	Persons.
002	Infective and Parasitic Diseases—			
056	Pulmonary tuberculosis .....	...	1	1
085	Whooping cough .....	...	1	1
	Measles	1	...	1
253	Allergic, Endocrine System, Metabolic and Nutritional Diseases—			
270	Myxoedema and cretinism	1	...	1
273	Disorders of pancreatic internal secretion other than diabetes mellitus.	...	1	1
	Diseases of thymus gland	1	...	1
331	Diseases of the Nervous System and Sense Organs—			
	Cerebral haemorrhage	1	...	1
491	Diseases of the Respiratory System—			
501	Bronchopneumonia	1	1	2
	Bronchitis unqualified .....	...	1	1
570	Diseases of the Digestive System—			
	Intestinal obstruction without mention of hernia.	...	1	1
576	Peritonitis .....	...	1	1
750	Congenital Malformations—			
751	Monstrosity .....	...	1	1
754	Spina bifida and meningocele .....	...	1	1
	Congenital malformations of circulatory system.	2	2	4
756	Congenital malformations of digestive system.	1	...	1
7600	Certain Diseases of Early Infancy—			
7605	Intracranial and spinal injury at birth—			
7610	Without mention of immaturity	2	1	3
	With immaturity	1	...	1
	Other injury at birth, without mention of immaturity.	1	...	1
7620	Postnatal asphyxia and atelectasis—			
7625	Without mention of immaturity	5	4	9
7630	With immaturity	1	...	1
	Pneumonia of newborn, without mention of immaturity.	1	1	2
7699	Neonatal disorders attributed to other or unspecified maternal toxæmia, with immaturity.	...	2	2
7700	Erythroblastosis, without mention of nervous affection or immaturity.	1	...	1
7710	Haemorrhagic disease of newborn, without mention of immaturity.	1	...	1
7730	Ill-defined diseases peculiar to early infancy, without mention of immaturity.	...	1	1
776	Immaturity unqualified	23	17	40
780	Symptoms, Senility and Ill-defined Conditions—			
	Certain symptoms referable to nervous system and special senses.	1	...	1
921	Accidents, Poisonings and Violence—			
924	Inhalation and ingestion of food (causing obstruction or suffocation).	...	1	1
	Accidental mechanical suffocation in bed and cradle.	3	...	3
	All Causes	48	38	86

* From 1st January, 1950, the Sixth Revision of the International Lists of Diseases and Causes of Death was adopted for classifying causes of death.

Health Services in the District.

During the year, owing to shortage of staff, some baby health centres and depots were closed temporarily.

The Hospitals Commission arranged for certain hospitals to receive poliomyelitis cases—viz., Bathurst, Orange and the Blue Mountains District Hospitals.

An orthopaedic surgeon visited the country centres in the west, including Bathurst and Orange, to see poliomyelitis cases.

Local Authorities.

The Bathurst City Council was advised of the need for another health inspector for its staff. Later in the year an appointment was made.

Reports to head office on the failure of the Oberon Shire to carry out its health services satisfactorily were made throughout the year and the appointment of a full-time health inspector for Oberon Shire was recommended. No full-time health inspector has been appointed yet.

Local authorities were asked to arrange for their health inspectors to attend conferences called periodically by the Medical Officer of Health. The first conference was held at Bathurst on 26th August, 1950.

Infectious Diseases Notified for the Year Ended 31st December, 1950.

Typhoid fever, 1.

Scarlet fever, 124.

Diphtheria, 5.

Poliomyelitis, 43, including 3 deaths.

Cerebro-spinal meningitis, 3, including 1 death.

Encephalitis, 2, including 1 death.

Puerperal infection, 1.

Compared with previous years, there has been a great increase in poliomyelitis and scarlet fever notifications. Most of the scarlet fever cases occurred in Bathurst, where there was an outbreak affecting mostly school children.

No source of infection was evident, but local doctors reported a general increase in the incidence of sore throats at the time.

A case of amoebic dysentery was reported at Wallerawang by Dr. Swinburn and subsequently investigated.

Housing.

The Housing Commission and private builders have not yet supplied the demand for houses.

Pure Food Act.

No pure food inspector has yet been appointed on the district staff. Periodically a food inspector from head office, Sydney, visits the district.

Noxious Trades Act.

The provisions of the Act were extended to the Lyndhurst Shire as from the 15th December, 1950.

Licenses issued in respect of each trade are as follows:

Pigkeeper	41
Fat extractor	33
Manure maker	1
Bone grinder	1
Blood boiler	1
Blood drier	1
Gut scraper	1

General Administration.

Local authorities have been, for the most part, co-operative. Long distances to travel over bad roads and in adverse weather conditions make contact difficult with some councils, especially Mudgee and Gulgong.

Medical Examinations.

Entrants into the service	8
Fitness to continue	2
Retirement	1
Sick leave	1

Inspections Made During the Year.

Inspection of sanitary depots	45
Inspection of garbage depots	59
Inspection of septic tank sites	209
Inspection of septic tank installations	31
Investigation of complaints	78
Inspection of noxious trade premises	103
Inspection of hotels	15
Inspection of food premises	25
Inspection of dairies	32
Investigation of infectious disease	1
Quarter Sessions Appeal Court	2 days
Inspection of sewage treatment works	2
Collection of water samples—	
Chemical	28
Micro	28
Inspection of sewage treatment works sites	4
Inspection of water catchment district	1
Investigation of Administration of Dairies	
Supervision Act	1
Inspection, septic tank disposal area	1
Inspection of polluted water supply	1
Inspection of piggery	1
Inspection of low-lying land at Kandos and Rylstone	1
Inspection of boundaries proposed nightsoil scavenging district at Spring Hill ...	1

RICHMOND-TWEED HEALTH DISTRICT.

Annual Report of the Medical Officer of Health, J. J. Donnellan, M.B., Ch.M., D.P.H., for the year ended 31st December, 1950.

This is the third annual report of the Medical Officer of Health of the Richmond-Tweed Health District. The district is situated in the far north-east corner of the State. It extends from South Grafton in the south to the Queensland border in the north, and westward to the western boundaries of Copmanhurst Shire and Kyogle Shire, the eastern boundary is the coast line extending from Yamba in the south to Tweed Heads in the north.

It comprises two cities, six municipalities and ten shires. The area is over 5,000 square miles and the population is approximately 120,000.

It is the most closely settled rural region in Australia. The industries are mainly dairying, cattle and pig raising, banana growing, sugar-cane growing and timber getting. Tropical fruits such as pineapples, paw paws, etc., are grown in the area.

There are several popular tourist resorts along the coast extending from Yamba to Tweed Heads. These tourist resorts attract large numbers of people during the tourist season, leading to a great temporary increase in the population of the district.

The staff consists of a medical officer of health, a senior health inspector and a female office assistant. No change in the office staff occurred during the year. No food inspector has as yet been appointed to the staff.

During the year many parts of the district were visited by flood rains and considerable damage was done to crops and property and stock losses were heavy, but owing to the excellent work of the police assisted by members of the local water brigade and other organisations no serious loss of human life occurred.

Sanitary services were dislocated in many places but these were put back into operation in a very short time by the local authorities.

Public Health Education.

Health displays were exhibited at the annual shows at Rylstone, Mudgee, Gulgong and Orange.

Talks were given by the Medical Officer of Health to interested groups, e.g., Mothers' Club, Bathurst Infants' School.

Press articles and broadcasts were given in assisting the campaign of the Anti-T.B. Association.

A film on poliomyelitis released by the National Film Board was distributed throughout the district for exhibition to doctors and nurses at the main centres.

Tuberculosis.

Early in the year the Mobile X-ray unit of the Anti-T.B. Association commenced their western tour, entering the Mitchell Health District in February and visiting the main centres. The results of the survey are briefly as follows:

Place.	Number examined.	Percentage showing radiological evidence of pulmonary T.B.	Percentage showing radiological evidence of significant pulmonary T.B.
Springwood	414	1.72	.....
Katoomba	2,774	2.3	.....
Lithgow	5,106	1.4	0.17
Bathurst	4,653	1.1	0.08
Orange	5,604	1.2	0.08
Orange Mental Hospital	1,528	5.4	1.11
Orange EMMCO	1,087	2.4	0.18
Molong	1,083	0.83	0.46
Mudgee	2,391	1.12	0.10

The relatively high figure for the Orange Mental Hospital is worthy of note.

The Citizens T.B. League of New South Wales (Katoomba Branch) conducted a Mantoux survey of school children in the Blue Mountains district towards the end of the year. A report by the League states that of 2,380 children who were Mantoux tested 295 showed a positive reaction; the highest evidence of positive reactors being from two schools in the district (37 per cent. and 28 per cent. positive respectively).

It was noted also that the older-age group showed a greater percentage of positive reactors, e.g., of 14-15 years group, 25.7 per cent. positive. An X-ray follow-up was done of the children—incomplete unfortunately.

During the year B.C.G. vaccination of the staff at Lithgow Hospital was done.

No increase in notifiable infectious disease occurred but many cases of influenza and pneumonia did occur.

Considering the magnitude of the disaster surprisingly little damage to public health resulted.

Vital Statistics, 1950.

Population.—The population of the district at 31st December, 1950, was estimated at 120,090, while the estimated mean population for 1950 was 119,030.

Marriages.—During 1950, 1,054 marriages were celebrated in the district, equivalent to a rate of 8.85 per 1,000 of mean population.

Live Births.—There were 3,178 live births to mothers resident in the district, equivalent to a rate of 26.70 per 1,000 of mean population. Of these, 1,682 were males and 1,496 females.

Ex-nuptial Live Births.—These numbered 100, equivalent to a rate of 0.84 per 1,000 of mean population. The ex-nuptial live births represented 3.15 per cent. of the total live births.

Deaths.—The deaths of residents numbered 938, equivalent to a rate of 7.88 per 1,000 of mean population. Of these, 542 were males and 396 females.

Infantile Mortality.—Deaths under 1 year of age numbered sixty, equivalent to a rate of 18.88 per 1,000 live births.

Of the total number of deaths of infants under 1 year of age, forty, or 66.67 per cent., occurred within one week of birth, and forty-five, or 75.00 per cent., within the first month. The corresponding rates per 1,000 live births for the two age groups were 12.59 and 14.16 respectively.

Still Births.—There were fifty-one still births to mothers resident in the district, equal to a rate of 0.43 per 1,000 of mean population and representing 1.58 per cent. of all births (live and still).

RICHMOND-TWEED HEALTH DISTRICT.
Marriages, Live Births, Stillbirths and Deaths—Each Local Government Area, 1950.

Municipality or Shire.	Area, 31st December, 1950.	Estimated Population.		Marr- riages.	Live Births.						Deaths.												Stillbirths.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
		31st Dec., 1950.	Mean 1950.		Total.			Ex- Nuptial.			All Ages.			Under 1 year.			Under 1 month.			Under 1 week.			Total.			Ex- Nuptial.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
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Causes of Death of Infants under one year of age, 1950.

Inter-national Code No. *	Cause of Death.*	Number of Deaths.		
		Males.	Females.	Persons.
212	Neoplasms— Benign neoplasm of respiratory system	1	...	1
365	Disorders of the Nervous System and Sense Organs— Erythroedema polyneuritica .....	...	1	1
480	Diseases of the Respiratory System— Influenza with pneumonia	1	...	1
491	Bronchopneumonia .....	...	2	2
493	Pneumonia, other and unspecified .....	...	1	1
500	Acute bronchitis .....	...	1	1
570	Diseases of the Digestive System— Intestinal obstruction, without mention of hernia.	...	1	1
571	Gastro-enteritis and colitis, except ulcerative, age 4 weeks and over.	2	2	4
751	Congenital Malformations— Spina bifida and meningocele .....	...	1	1
754	Congenital malformations of circulatory system.	1	1	2
755	Cleft palate and hare lip .....	...	1	1
756	Congenital malformations of digestive system.	1	...	1
759	Other and unspecified congenital malformations, not elsewhere classified.	...	2	2
7600	Certain Diseases of Early Infancy— Intracranial and spinal injury at birth, without mention of immaturity.	1	...	1
7610	Other birth injury— Without mention of immaturity .....	...	1	1
7615	With immaturity	2	...	2
7620	Postnatal asphyxia and atelectasis, without mention of immaturity.	1	3	4
7630	Pneumonia of newborn, without mention of immaturity.	1	...	1
7695	Neonatal disorders attributed to "toxæmia of pregnancy," with immaturity.	1	...	1
7700	Erythroblastosis, without mention of nervous affection or immaturity.	1	1	2
7710	Haemorrhagic disease of newborn, without mention of immaturity.	2	1	3
7720	Nutritional maladjustment, without mention of immaturity.	1	...	1
7730	Ill-defined diseases peculiar to early infancy— Without mention of immaturity	2	...	2
7735	With immaturity .....	...	1	1
776	Immaturity unqualified	10	8	18
780	Symptoms, Senility and Ill-defined Conditions— Certain symptoms referable to nervous system and special senses.	...	1	1
921	Accidents, Poisonings and Violence— Inhalation and ingestion of food causing obstruction or suffocation.	...	1	1
924	Accidental mechanical suffocation in bed and cradle.	1	1	2
	All Causes	29	31	60

* From 1st January, 1950, the Sixth Revision of the International Lists of Diseases and Causes of Death was adopted for classifying causes of death.

Health Services in the District.

There are two full-time baby health centres, ten part-time baby health centres.

There are nine ambulance stations and three sub-stations.

There are ten public hospitals with 782 beds.

Sanitary Circumstances in the District.

It is felt that improvement in the sanitation of this district has continued during the year and further improvement will undoubtedly occur on completion of the various schemes, some of which are projected and others have actually begun.

The Rocky Creek Water Supply Scheme has not yet been completed. When it is it will be the means of supplying pure water to Lismore, Byron Bay and towns on the Lower Richmond River.

The extension of the Nymboida Water Scheme to towns on the Lower Clarence River has not yet commenced.

A commencement has been made in the work of sewerage the town of Murwillumbah, and an augmentation scheme for Lismore is approved, but not yet commenced. The town of Kyogle is now sewerage, but the household connections are not yet complete.

Public Health Act.

Infectious Diseases.

Tuberculosis	22
Diphtheria	38
Infantile paralysis	7
Typhoid fever	—
Encephalitis lethargica	—
Puerperal infection	—
Yellow fever	—
Cholera	—
Scarlet fever	15
Cerebro-spinal meningitis	2
Typhus fever	11
Undulant fever	1
Smallpox	—
Bubonic plague	—

The provisions of the Act with regard to infectious disease have been found generally to receive proper attention by the local authorities.

Immunisation against Diphtheria.

During the year 1950 diphtheria immunisation campaigns were carried out by eleven out of eighteen local authorities.

There has been a decrease of over 50 per cent. in the number of cases occurring during the year over the average number of cases for the previous two years, thirty-eight (38) compared to the average of seventy-eight (78) for the previous two years. Thirty-two of the thirty-eight cases were children under the age of 14 years and of these thirty-two (32) children nine (9) of them gave a history of having been immunised against diphtheria less than five years previously. From enquiries and investigations made these nine cases were very mild.

The incidence of scarlet fever also decreased during the year from thirty-seven (37) to fifteen (15), but eleven (11) cases of endemic typhus occurred, which is an increase of 82 per cent. on the previous two years.

Seven (7) cases of acute anterior poliomyelitis occurred, six of them during the last months of the year. It would appear that the epidemic of this disease is about to spread from the southern districts to this area.

The use of B.C.G. Vaccine in this district was extended during the year and Mantoux negative nurses at Tweed District Hospital and Kyogle District Hospital were vaccinated.

It is hoped that during the coming year this vaccine will be in use at all of the public hospitals in this district.

Local Government Act.

Continued inspections have been made of sanitary depots and investigations of nightsoil and garbage removal services.

Camping areas and tourist reserves have received attention. At two of the principal tourist resorts Tweed Heads and Yamba (Harwood Shire) insufficient inspectorial work has been carried out by the local authorities. This matter has received attention and action has been taken to have additional staff appointed at Tweed Shire and a qualified health inspector at Harwood Shire.

Complaints from members of the public have received attention and where necessary the local authorities have been requested to take appropriate action in connection therewith.

Inspections have been made of licensed hotel premises in company with the licensing inspector. Recommendations in regard to sanitary matters generally have been submitted for the information and guidance of the licensing authorities.

Private and public water supplies have been investigated and samples submitted to the Government Analyst for examination and report.

At the request of this Office a sanitary survey has been carried out by officers from head office in Harwood Shire and as a result the Minister for Local Government has directed the Harwood Shire Council to appoint a health inspector for that area.

Investigations were also carried out in regard to the sanitary circumstances at Tintenbar Shire and the Municipality of Ballina. Following this investigation the Ballina Municipal Council was called upon to appoint a full-time health inspector.

Noxious Trades Act.

One hundred and seventy-five (175) Licenses have been issued under this Act for the 1950-51 Licensing period.

Inspections of these premises have been made and where necessary recommendations have been submitted for improvements to structural conditions and general maintenance. Some delay has been experienced in having structural improvements carried out owing to the shortage of material in this district.

Pure Food Act.

This Act continues to be administered from head office and periodic visits of a food inspector from head office were made during the year. It is felt that the standard of food premises in the district is not as high as it should be, particularly does this apply to food premises in outlying villages where sufficient supervision cannot be carried out under the existing arrangements.

During the year on six occasions it was found that food-stuffs were being sold in this district which were not of a standard required by the Pure Food Act. These food stuffs were found in the smaller villages of the district and had been brought from other States.

It would, therefore, appear that more frequent visits to this area should be made by a food inspector not only to the larger towns as at present, but also to the outlying towns and villages.

Health Education.

Education of the public in health matters has been given attention by means of newspaper articles and comments and broadcast talks throughout the year and especially during Health Week.

In addition, in conjunction with Casino Municipal Council a Local Health Week was held at Casino which included a health exhibition at the Casino Memorial Hall. This Department's contribution to that exhibition consisted of a general health display, a T.B. display, and a pure food display and also the showing of health films. A nurse from the T.B. Division, a projectionist and a pure food inspector from head office were present and gave assistance. The exhibition was very largely attended and I feel sure was a very potent means of spreading knowledge of health among the people.

In conjunction with this health exhibition a conference of councils' health inspectors was called by the Medical Officer of Health and this was addressed by Dr. J. R. Shannon, Medical Officer of Health for the Hunter River Health District. Matters of public health interest and importance and the latest advances therein were discussed. Films were also exhibited to the inspectors.

The Medical Officer of Health, as in previous years, lectured on hygiene to the trainee nurses at the Lismore Base Hospital as part of their course.

The work of this office has been facilitated during the year by the help and co-operation of the medical practitioners practising in the district, and particularly of the medical officer-in-charge of the Commonwealth Health Laboratory at Lismore and members of his staff.

Twenty-one (21) medical examinations were carried out during the year.

General Administration.

Mileage travelled by officers on duty:—

Medical Officer of Health—5,398 miles.
Senior Health Inspector—11,858 miles.

Inspections:—

Septic tanks reported upon	50
Inspection of proposed sites for septic tanks ..	136
Septic tanks inspected	55
Samples of septic tank effluent submitted for analysis	1
Septic tank plans recommended for approval ...	44
Inspection of noxious trades premises	96
Inspection of butcher's shops	33
Investigation of water supplies	10
Samples of water submitted for chemical analysis	6
Samples of water submitted for bacteriological examination	14
Investigation of nuisances	34
Sanitary depots inspected	36
Garbage depots inspected	26
Inspection of proposed site for swimming pool	1
Inspection of hotels	111
Proposed nightsoil scavenging districts	7
Sanitary depot sites recommended for approval	2
Inspection of proposed sanitary depot sites ..	6
Inspection of proposed garbage depot sites ..	2
Inspection of camping areas and reserves	17
Inspection of racecourse, showground and sports grounds	19
Sanitary services investigated	5
Garbage services investigated	5
Inspection of insanitary buildings	9
Inspection of aborigine reserves and camps ..	1
Inspection of public halls	16
Investigation of mosquito control	4
Inspection of rest home	1
Investigation of pollution of natural water-course	1
Inspection of proposed site for hospital	1
Inspection of laundrette	1
Inspection of storekeeper and cafes	11
Investigation of food poisoning	1
Investigation of sale of prohibited article of food	1
Attendance at court proceedings on behalf of council	4
Legal proceedings by this department	3

Office Routine:—

The number of letters despatched during the year 1950 was one thousand and ninety-two (1,092).

BROKEN HILL AND DISTRICT.
Report of Medical Officer of Health, J. T. Cullen, M.B., B.S., for the Year 1950.

The population of Broken Hill Municipal District in 1950 was estimated at 29,600, which represents a considerable increase when compared with that for the previous year.

The deaths for the period under review numbered 250 (males 138, females 112). There were 790 births for the twelve months comprising 383 males and 407 females.

Infectious Diseases.

The monthly incidence of notifiable infectious diseases was as follows:—

Month.	Typhoid Fever.	Scarlet Fever.	Diph- theria.	Meningo- coccal Meningitis.	Puerperal Infection.	Infantile Paralysis.
1949—						
July
August
September	1
October
November
December
1950—						
January
February
March
April
May
June
Totals	Nil	Nil	Nil	Nil	Nil	1

The remarkably low incidence of infectious disease is again noteworthy. Apart from one reported case of poliomyelitis there were no cases of infectious disease. This is an improvement on the previous twelve months, and is a record case incidence for Broken Hill.

At the Anti-tuberculosis Clinic ninety-eight new cases were investigated, an increase of twenty-one on the previous twelve months. The total number of attendances at the clinic during the period under review was 446, an increase of forty-six when compared with the previous twelve months.

Details of other duties performed are as follows, the figures for the previous twelve months being shown in parenthesis:—

- Post-mortem examinations at the request of the coroner—32 (17).
- Attendances at court and giving evidence in police cases—25 (17).
- Examinations of prisoners or of arrested persons—43 (12).
- Examinations and reports on police constables re fitness for duty—20 (10).
- Governmental examinations (Public Service Board, Railway Department, Education Department, etc.)—19 (27).
- Visits and interviews as Medical Officer of Health—21 (30).
- Vaccinations—30 (30).

SECTION III.
STATE HOSPITALS AND HOMES.

STRICKLAND CONVALESCENT HOSPITAL.
Statistical Information for Annual Report Year Ending 31st December, 1950.

Visiting Emergency Medical Officer.—Dr. R. C. TRAILL.
Matron.—Miss H. MCGREGOR.
Clerical Staff.—Mr. D. MCHARG.
Trained Nurses.—Four.
Assistant Nurses.—Three.
Female Domestic Staff.—Seven.
Outdoor attendant, 1; night attendant, one; attendant cleaner, 1.
Patients Bed Accommodation.—Males, 40; females, 70; inmate workers, 21.
Remaining in Hospital, 31st December, 1949.—Twenty-eight males; 33 females; 17 inmate workers.

	Males.	Females.	Total.
Patients admitted during 1950	343	653	996
Patients discharged during 1950	342	635	977
Patients remaining in hospital 31st December, 1950.	29	51	Inmate Workers 18

Daily Average—Males, 30; Females, 47; Inmate Workers, 18.

Maintenance and donations for the year, £948.
Patients are admitted to the hospital through metropolitan hospitals, Health Department and country doctors. Many cases of plaster and crutch infirmities who with many others are admitted here, are obliged to report frequently to the transferring hospital for X-ray, deep ray, etc. This happens sometimes for some patients three or four times weekly, owing, of course, to the ever-growing extreme shortage of beds in these hospitals. It is a regular thing for patients to be sent here with fractured limbs two or three days after the accident, and then have to report back to the transferring hospital, frequently for observation, etc. The same applies to eye and deep ray cases, and it is becoming increasingly evident that we are changing from a convalescent hospital to a subsidiary of the general hospitals.
Usual maintenance, etc., has been undertaken by the Public Works Department during the year.

LIDCOMBE STATE HOSPITAL AND HOME.
Report of Medical Superintendent for the Year Ending December, 1950.

Honorary Visiting Staff.
Honorary Staff Surgeon.—H. C. Rutherford Darling, L.R.C.P. (Lon.), M.R.C.S. (Eng.), M.B., B.S., M.D., M.S. (London), L.F.P.S. (Glasgow).
Assistant Hon. Surgeon.—J. A. Lawson, M.B., Ch.M., F.R.A.C.S.
Hon. Urologists.—C. M. Edwards, M.B., Ch.M.; H. G. Cummine, M.B., B.S. and M.S.
Hon. Ophthalmic Surgeons.—A. E. Fraser Chaffer, M.B., Ch.M.; F. J. A. Pockley, M.B., B.S.; C. E. H. Beckett, M.B.; Eunice Wilson, M.B., B.S., D.O.M.S.
Hon. Dermatologist.—Vacant.
Hon. Ear, Nose and Throat Surgeon.—R. E. Dunn, M.B., B.S., B.Sc.
Radiologist.—Colin R. Cole, M.B., Ch.M.
Dentist.—D. G. Brown.

Staff Administrative.
Medical Superintendent.—E. J. Brooks, M.B., Ch.M.
Deputy Medical Superintendent.—G. S. Procopis, M.B., M.R.A.C.P.
Senior Medical Officer.—S. H. Swift, M.B., Ch.B., 1925, Univ. N.Z., D.T.M. & H. London 1930, L.M. Rotunda 1935, D.R.C.O.G., Eng., 1935.
Junior Medical Officers.—A. F. J. D'Arcy, L.M.S.S.A., Lond., 1927; A. H. Crowley, M.B., B.S., 1916, Univ. Melbourne; J. D. Murphy, M.B., B.S., Sydney.
Manager.—W. C. Maedonald.
Matron.—Miss A. J. Carr.

Nurses.—Forty.
Other Female Staff.—Thirteen.
Attendants.—One hundred and twenty-nine.
Other Male Staff.—Fifty-one.
No. of beds available as at 31st December, 1950.—Hospital, 796; dormitories, 519; total, 1,315.

Daily Average Number of Patients and Inmates Resident.

1946	1,201
1947	1,137
1948	1,133
1949	1,175
1950	1,173

Admissions—Discharges.

	Hospital Division.	General Division.	Total.
In Institution, 1st January, 1950	727	420	1,147
Admissions	1,159	1,134	2,293
Transfer from yard and other Sections	293	243	536
	2,179	1,797	3,976
Discharges	701	1,064	1,765
Deaths	521	8	529
Transfers to other Sections	243	293	536
	1,465	1,365	2,830
In Institution, 31st December, 1950	742	431	1,173

Daily average numbers in residence during the year :—
Hospital Division, 701; General Division, 474; Total, 1,175

Casual Relief.—One hundred and twenty-four indigent persons were provided with sleeping accommodation for one night, and 208 were supplied with a meal.
During the year 171 major operations were performed. Three thousand, one hundred and twenty-eight cases were examined in the X-ray department, including examination of staff as prescribed by the award made by Judge Kinsella.
Two thousand three hundred and sixty-nine specimens were examined in the Pathological Department.
Electrocardiograms were taken and reported on.
Laundry.—One million one hundred and twenty-eight thousand six hundred and eight-nine articles were laundered.
Farm.—Sale of pigs, etc., realised £789 16s. 3d.
The bakery at this hospital was closed on 30th November, 1950. However, 820,388 lb. of bread were produced at an average cost of 1.77 pence per lb. and 33,353 lb. of cake and buns were produced at an average cost 4.03 pence per lb.
The following works were carried out by the Public Works Department during the year ended 31st December, 1950:—

- (1) Kerbing and guttering of roads near artisans' workshops.
 - (2) Remodelling of ward kitchens.
 - (3) Installation of hot water service at medical officers' residence.
 - (4) Repairs to water main at boiler house.
 - (5) Repairs to floor, Ward 27.
 - (6) Installation of ceiling fans in wards.
 - (7) Installation of refrigeration main mess room.
 - (8) Sealing off main effluent tank.
 - (9) New fence at medical superintendent's residence.
 - (10) Repairs to ceiling at general store.
 - (11) Remodelling of kitchen at nurses' quarters.
 - (12) Storage for display materials—barn building.
 - (13) Enclosing of verandah—Ward 12.
 - (14) Rewiring of electric circuits and installation of general purpose outlets, Ward 20.
- Expenditure, 1950 (see p. 88).

LIVERPOOL STATE HOSPITAL AND HOME.

Report of Medical Superintendent for the Year Ended 31st December, 1950.

Honorary Visiting Staff.

Surgeon: J. A. Lawson, M.B., Ch.M., F.R.A.C.S.; Assistant Surgeons: N. C. Newton, M.B., B.S., F.R.A.C.S.; Justin P. Fleming, M.B., B.S., F.R.C.S.; Orthopaedic Surgeon: Neville H. Morgan, M.B., B.S., F.R.C.S.; Anaesthetist: R. V. Rickard, M.B., Ch.M., F.R.C.S., F.R.A.C.S.; Neuro-Surgeon: J. R. Tripp, M.B., B.S.; Ear, Nose and Throat Surgeon; H. A. J. Lister, M.B., B.S., D.L.O.

Staff.

Though staff shortages still persisted the position towards the close of the year showed a fair measure of improvement. Recruitment of additional female nursing personnel, though largely of the Nursing Aid classification, permitted the re-commissioning of "D" Ward—a District Ward which, through inadequacy of staff, had been closed continuously since January, 1946.

Details of staff actually employed as at 31st December, 1950, are as follows, viz.—

Medical Superintendent, C. R. O'Brien, M.B., Ch.M.; Senior Medical Officer (Acting), J. J. L. McDonald, L.R.C.P.; Medical Officer, J. O. Marel, M.B., B.S.; Manager, E. C. Barrett; Matron, N. Hoare; dispenser, 2 clerks, 4 office assistants, storekeeper and assistant storekeeper, 28 nurses (including aids), chief attendant, deputy chief attendant, 30 attendants, 27 other male staff, 11 other female staff. In addition, a dental surgeon attended the institution one whole day each week.

Number of Beds and Wards.

Hospital division comprising 11 wards containing 289 beds, whilst dormitory accommodation for inmates of the home section remained constant at 446 beds throughout the year.

Admissions and Discharges.

In residence 1st January, 1950—681. Admitted during year, 2,573. Discharged, 2,184. Died, 381. Total remaining at 31st December, 1950—688. Average daily number resident—685. Average cost per occupied bed—£165 9s. 4d.

Summary of Ward Patients treated during 1950.

Section.	In Hospital, 1-1-50.	Admitted during year.	Discharged during year.	Died during year.	In Hospital, 31-12-50.
Cancer Wards	63	155	40	102	61
General Wards	169	227	121	177	170
Total	232	382	161	279	231
District Wards	22	961	810	89	50
Grand Total	254	1,343	971	368	281

Operations.

A total of 383 operations were performed during the year, of which 258 could be classified as of a major nature.

Outpatients.

A total of 31,084 attendances were recorded during the year.

Review of Work.

Buildings.—Owing, apparently, to a planned deferment of work under this heading, little activity on the part of the Public Works Department in regard to buildings at this institution was noted during the year. The only projects worthy of mention relate to certain repair and renovation work carried out at the cottage formerly occupied by the Herdsman, and the commencement made in the last month of the year with work of a like nature at the outpatients' department building. Complete renewal of the flooring in the main dormitory block, comprising dormitories numbered 2 to 8, was commenced late in August, 1950, but was not completed at the close of the year.

Services.—The services of the institution were maintained in a reasonably satisfactory condition during the year.

Early in 1950 installation of hot water systems at several residences was carried out and the replacement of an old and outmoded main electrical switchboard, by one of modern type, in the main hospital block was effected. A commencement was also made late in the year with the complete renewal, in hard-wood, of the several fire escape stairways, serving upstairs Wards "C", "D", "E" and "F", whilst the relaying of about 112 feet of main sewer pipeline was also commenced towards the close of the year.

Renewal of the roadway, including kerbing and guttering, to the Cancer Division, commenced in January, was completed in April, 1950, and the installation of a control valve in the water main beyond that block was effected in the final month of the year.

Entertainments.—The inmates were well provided with entertainments throughout the year, with occasional mid-week concerts, in addition to the very frequent Saturday evening variety shows, which are invariably well attended and do much to relieve the monotony of institutional life. To the promoters and artists comprising the many parties who so attend, the grateful thanks of this administration are tendered.

The weekly cinema entertainment also continued to be very well patronised throughout the year.

Visits in the near-Christmas period of representatives of such organisations as the Australian Workers' Union, Waterside worker's Union and the Ex-Imperial Soldiers and Sailors' Sub-Branch, by whom cash donations are made to their respective ex-members, towards promoting a happier Christmastide, was also a pleasing and noteworthy feature, as the year 1950 drew to a close.

Farm—Dairy and Piggery.—As in recent years it is again necessary to record with regret, that the year 1950 closed without it being possible to recommence pig-raising activities in consequence of the non-restoration, to pre-Army occupation condition, of the lands and buildings required for such project.

Gardens and Grounds.—The condition of the gardens and grounds were satisfactorily maintained throughout the year.

In respect of vegetable gardening activities, the unavailability of the services of a staff gardener for approximately the first three months of the year imposed a severe handicap, and production in this section declined considerably as a result. Guinea pigs supplied to the Microbiological Laboratory and Repatriation Hospital, Concord, for pathological purposes totalled 486 for the year.

NEWINGTON STATE HOSPITAL AND HOME.

Honorary Medical Staff.

Neurologist—vacant.
Ophthalmic Surgeon—vacant.

Staff.

Medical Superintendent—J. McManamey, M.B., B.S. (Sydney); Deputy Medical Superintendent—Lottie Sharfstein, M.B., Ch.M.; Manager—Mr. V. L. Delaney; Matron—Miss A. Wilson; nurses, 70; dispenser, 1; senior clerk, 1; clerk, 1; female office assistants, 2; storekeeper, 1; female office assistant in store, 1. A dentist visits the institution fortnightly. Male staff, 36; other female staff, 31.

Admissions and Discharges.

Inmates in institution on 1st January, 1950, 422. Admissions during year, 674. Discharges, 601. Died, 73. Remaining in institution at 31st December, 1950, 422. Average daily number, 426.

Hospital Division Statistics.

Beds available	342*
In hospital at 1st January, 1950	223
Admissions during year	101
Discharges during year	31
Died during year	70
In hospital at 31st December, 1950	223

* Includes ninety-seven beds temporarily unavailable in wards closed owing to shortage of nurses.

RANDWICK AUXILIARY HOSPITAL.

Report for the Year Ended 31st December, 1950.

The following are the statistics summarising the work of the hospital during the twelve months ended 31st December, 1950.

Indoor Patients.

	Males.	Females.	Total.
Patients under treatment on 31st December, 1949	74	80	154
Admitted during 1950	72	50	122
Total treated during 1950.....	146	130	276
Died during 1950	44	32	76
Discharged during 1950	27	24	51
Total died and discharged, 1950...	71	56	127
Remaining in hospital on 31st December, 1950	75	74	149
Daily average number of resident patients	77	75	152
Average residence of discharged and deceased patients in days	342	425	378
Number of individuals who received out-door treatment .....	...	...	95
Total number of visits made by out-door patients .....	...	...	1,614

Inmate Workers.

In institution on 31st December, 1949	10
Admitted during 1950	36
Total	46
Discharged during the year 1950	35
Remaining in institution on 31st December, 1950	11
Daily average number	11
General daily average number, including workers	163

Operations Performed.

Thoracoplasty	14
Phrenic crush	134
Thoracoscopy	1
Bronchoscopy	179
Abdominal and pelvic	5
	333
Minor operations	103
Total	436

X-ray Department.

X-ray examinations	1,873
Barium	6
Screening	460
Films used	2,093
Dental films used	138

Staff.

Honorary Staff:

Honorary Ear, Nose and Throat Surgeons	2
Honorary Urologist	1
Honorary Thoracic Surgeons	2
Honorary Dermatologist	1
Honorary Orthopaedic Surgeon	1
Honorary General Surgeon	1
Honorary Consulting Physician	1
Honorary Anaesthetists	1
Honorary Ophthalmologist	1
	13

Medical and Clerical:

Medical Superintendent	1
Medical Officer	1
Junior Medical Officers	3
Manager	1
Clerks (male)	2
Office Assistant	1
	9

Nursing:

Matron	1
Sub-matron	1
Tutor Home Sister	1
Theatre Sister	1
Nurses (female)	66
Nurses (male)	19
	89

Domestic Staff:

Wardmaids and Housemaids	34
Kitchenmaids	2
Kitchenmaid Cook	1
Cooks	3
Kitchenmen	2
Seamstress	1
	43

Miscellaneous:

Male Cleaners—cleaning in wards	5
Maintenance of grounds, etc.	5
Steam-raising plant	3
Store	1
Occupational Therapy	1
Microbiologist	1
Dispenser—female	1
Dietitian—female	1
	18
Total Staff, full-time	172

Visiting Staff:

Radiologist	1
X-ray Technician	1
Clergymen	2
	4
Total	176

Staff Shortages.

Nursing Staff	19
Domestic Staff	4
Dispenser	1

The staff shortages at the end of the year were less than those as at 31st December, 1949.

Appended is a statement of the shortages:—

	31-12-49.	31-12-50
Nursing Staff	23	19
Domestic Staff	2	4
Dispenser	1	1

Daily Average Number of Patients.

The undermentioned schedule illustrates the fluctuation in the number of patients in residence since the peak of year of 1942:—

1942	299.2
1943	194
1944	185
1945	152.69
1946	123.9
1947	107
1948	115
1949	148
1950	152

WATERFALL SANATORIUM.

(1) (a) Number of beds available on 31st December, 1950.

	Males.	Females.	Total.
Patients	260	171	431
Working inmates	129	19	148

	Patients.	Workers.	Total.
(b) Remaining in hospital on 31st December, 1949	262	128	390
Admitted during 1950	175	869	1,044
Total treated during 1950.....	437	997	1,434
Number discharged	159	877	1,036
Number died	23	...	23
Remaining in hospital on 31st December, 1950	255	120	375
Average daily number resident	265	121	386

Average residence of discharged patients in days... 37
*Total cost of maintenance and treatment of Indoor Patients.
Average daily number of inmates resident 386
*Average cost per inmate.
Average daily number of patients resident 265
*Average cost per patient.

(c) Exchange Services—Lidcombe Credit £369 8s. 2d
Outpatients or individuals who received treatment 22
Total number of attendances 37
Total number of X-rays for outpatients 74

(2) Staff as at 31st December, 1949—	Posts.	Actually Em- ployed.	Vacant
Honorary Medical Staff.....	2	2	...
Medical Staff	5	3	2
Managerial and Clerical.....	3	3	...
Nursing Staff, Female	†44	25	19
Nursing Staff, Attendants	§23	20	3
Male Outdoor Staff	29	22	7
Female Outdoor Staff	14	14	...

* Expenditure figures not yet supplied by Accounts Branch.
† Actual authorised nursing staff 50 but reduced to 44 by the employment of 6 attendants.
§ Includes 6 attendants in lieu of Nurses.

DAVID BERRY HOSPITAL.

Annual Report for the Year Ended 31st December, 1950.

Following are the statistics summarising the activities of this hospital during the year ended 31st December, 1950.

Indoor Patients.

	Males.	Females.	Total
Patients under treatment on 31st December, 1949	7	5	12
Admitted during 1950	277	249	526
Total treated during 1950.....	284	254	538
Died during 1950	12	6	18
Discharged during 1950	265	247	512
Total died and discharged, 1950...	277	253	530
Remaining in hospital on 31st December, 1950	7	1	8
Births during 1950	10	9	19
Daily average number of resident patients	8.4	7.5	15.9
Average residence of discharged and deceased patients in days	11	10.9	...

Total number of patients who received out-door treatment 70

Working Inmates.

In institution on 31st December, 1949	2
Admitted during 1950	1
Total	3
Discharged during 1950	3
Remaining in institution on 31st December, 1950	Nil
Daily average number .....	.83
General average number (daily) including workers	16.73

Operations Performed.

Head, Face, Sinns, E.N.T.	25
Abnormal	66
Orthopaedic	6
Gyno. and Curettes, etc.	35
Dental	15
General	21
Minor	42
Total	210

X-ray Department.

Films used (including 30 dental)	389
--	-----

Standard Establishment.

Medical and Clerical.

Medical Officer (Part-time)	1
Clerk (Male)	1
	2

Nursing.

Matron	1
Head Nurse	1
Trained Nurses	6
Assistants in Nursing	3
	11

Attendants.

Indoor Attendants	2
Outdoor Attendants	2
	4

Domestic Staff.

Wardmaids and Housmaids	5
Housemaid Part-time Cook	1
Cook	1
Laundresses	2
	9

Total Authorised Staff 26

Staff Shortages.

Staff shortage as at 31st December, 1950.	
Nursing Staff	2

The staff position throughout the year fluctuated and at times the shortage was acute. However, the daily average of resident patients was higher than the previous twelve months and the number of operations performed was practically the same.

LEPER LAZARET.

Report on Leprosy in New South Wales for the Year Ended 31st December, 1950.

On 1st January, 1950, twenty (20) persons remained under detention at the Lazaret.

No deaths occurred during 1950.

The total number of persons admitted since 1883, when patients were first received (though the notification of leprosy was first made compulsory and the detention of lepers provided for by law only towards the end of 1900), is 229. Distributed under nationalities, the account stands as follows at 31st December, 1950:—

	Ad- mitted.	Re- admitted	Dis- charged.	Re- patriated	Died.	Remaining in at 31st Dec., 1950.
Whites, of European descent—						
New South Wales...	5
Victoria	1
Queensland	1
Northern Territory	1
Western Australia...	1
New Zealand	1
Fiji	1
England
Ireland
Scotland.....
Germany
Belgium
U.S. America
Greece
Malta	3
Sweden
France
Mauritius
Italy
India	1	...	...	...	...	...
Coloured patients—						
New South Wales...	5
West Indies
India
China	2
Straits Settlements	1
Java
New Caledonia
Pacific Islands
Egypt
Zanzibar
Syria
Somaliland-Africa	1	...	1

Thus the number remaining in the lazaret on 31st December, 1950, was twenty persons; thirteen males and seven females.

Appendix A shows particulars of each case under detention since the year 1912.*

Every opportunity has been offered to members of the medical profession to visit the lazaret for the purpose of seeing such patients as were formerly under their care, or for study of the disease.

The following statements show the expenditure for the year, and the sources from which it has been defrayed:—

Statement showing the working expenses of the Lazarets (for men and for women) at Little Bay for the year 1950.

	£	s.	d.
Salaries	6,737	5	4
Provisions	3,194	5	1
Tobacco and comforts	398	13	1
Clothing	640	15	6
Fuel and light	502	1	6
Drugs, dressings, etc.	287	16	8
Miscellaneous	1,411	16	0
	£13,172	13	2

Deduct amounts received in respect of maintenance, £3,296 6s. 9d., nett cost, £9,876 6s. 5d.

Average number of patients resident, 20.9, being equal to an average of £472 11s. per inmate per annum in 1950.

- In Lazaret on 1st January, 13 males, 7 females; total, 20.
- Admitted during the year, 1.
- Died during the year, nil.
- Discharged, nil.
- Repatriated, 1.

Remaining in Lazaret on 31st December, males, 13; females, 7; total, 20.

STATISTICAL SUMMARY.

TABLE I.—Summary of Expenditure—Randwick Auxiliary Hospital, Strickland Convalescent Hospital, Waterfall Sanatorium, State Hospitals and Homes Lidcombe, Liverpool and Newington, and David Berry Hospital, for the twelve months ended 30th June, 1950.

Head of Expenditure.	Randwick.	Strickland.	Waterfall.	Lidcombe.	Liverpool.	Newington.	David Berry.	Total.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Salaries and Payments in the nature of								
Salaries	53,833 2 7	6,656 16 0	40,749 14 3	119,819 9 1	52,999 8 7	42,222 10 2	8,545 17 2	324,826 17 10
Provisions.....	17,099 3 10	5,842 11 10	27,552 10 7	55,980 9 3	25,504 8 6	23,935 9 11	1,552 4 4	157,466 18 3
Drugs and Surgical Appliances,								
Dressings, etc.	4,258 11 6	67 9 5	5,395 9 0	9,404 1 4	5,391 9 8	1,174 19 7	1,269 0 1	26,961 0 7
Fuel, Electricity and Water.....	2,926 9 6	785 10 5	5,055 7 4	8,993 7 10	3,370 4 11	5,008 2 2	362 6 8	26,501 8 10
Domestic Utilities, including Laundry								
Expenses, Household Linen, Clothing,								
Furniture, etc.	4,804 16 11	780 11 2	4,746 6 2	13,797 7 1	8,389 17 10	5,635 13 4	1,489 3 5	39,643 15 11
General Establishment	3,742 7 4	737 3 8	9,166 1 4	15,070 12 4	9,587 3 1	7,274 16 5	730 18 6	46,309 2 8
Renewals and Renovations to Buildings								
and Plant	8,598 9 10	4,128 8 10	10,465 15 7	12,468 16 6	6,612 10 0	20,176 17 0	1,187 16 6	63,638 14 3
Gross Maintenance Expenditure ...	95,263 1 6	18,998 11 4	103,131 4 3	235,534 3 5	111,855 2 7	105,428 8 7	15,137 6 8	685,347 18 4
Collections for Sales, Maintenance, and								
Payments by Commonwealth Govern-								
ment	23,880 8 6	931 10 1	38,698 2 0	117,369 19 10	46,682 0 7	38,510 2 8	2,364 19 4	268,437 3 0
Nett Maintenance Cost to State ...	71,382 13 0	18,067 1 3	64,433 2 3	18,164 3 7	65,173 2 0	66,918 5 11	12,772 7 4	416,910 15 4
Average daily population	168	90	387	1,175	676	434	17	2,947
Average annual cost per patient on gross	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
maintenance expenditure	567 0 10	211 1 11	266 9 9	200 9 2	165 9 4	242 18 6	890 8 8	232 11 2
Average annual cost per patient on nett								
maintenance cost to State	424 17 11	200 14 11	166 9 11	100 11 3	96 8 3	154 3 10	751 6 4	141 9 5
Average weekly cost per patient on gross								
maintenance expenditure	10 17 6	4 1 0	5 2 2	3 16 11	3 3 6	4 13 2	17 1 7	4 9 2
Average weekly cost per patient on nett								
maintenance cost to State	8 3 0	3 16 10	3 3 10	1 18 7	1 17 0	2 19 1	14 8 2	2 14 3
Capital expenditure not included in								
maintenance.....	6,585 15 2	5,001 5 11	20,238 18 0	22,148 17 7	4,241 16 8	8,030 0 8	.....	66,246 14 0

SECTION IV.

PATHOLOGICAL LABORATORIES.

REPORT OF THE DIRECTOR OF PATHOLOGICAL LABORATORIES FOR THE YEAR 1950.

Director.—ERNEST LESLIE MORGAN, M.B., Ch.M. (Syd.).

Assistant Director.—Keith H. Grieve, M.C., M.B. (Syd.).

Medical Officers.—Stanley W. M. King, L.R.C.P. (Lond.), M.R.C.S. (Eng.); Farquhar W. Fraser, M.B., Ch.M. (Syd.); Stephen G. Mallarky, M.B., B.S., D.T.M.; John D. Murphy, M.B., B.S. (transferred to Lidecombe State Hospital on 13th March, 1950); Pamela Bulteau, M.B., B.S. (commenced duty 23rd October, 1950).

Senior Microbiologist.—H. V. Justelius.

Microbiologists.—L. H. Snell, A.S.T.C., A.A.C.I.; W. C. Thompson; Annette Playoust, B.Sc. (Syd.); R. Truman, A.S.T.C. (transferred to Forestry Commission on 3rd January, 1950); E. Jacob, B.Sc. (Agr.); B. O'Connor, A.S.T.C. (transferred to Randwick Auxiliary Hospital Laboratory on 3rd January, 1951).

Laboratory Assistants.—A. J. Williamson, J. Flynn, D. Croft, L. F. Horton, K. Fraser, D. Brown, J. B. Jones, P. Helisma (resigned 13th October, 1950), R. F. Taylor, W. A. Bronkhurst, B. Sinkovic, N. Martin (commenced 28th August, 1950), W. Camden (commenced 19th June, 1950, resigned 30th June, 1950).

Clerical.—N. E. Seahill, E. J. Starr (resigned 3rd November, 1950), J. Barrett (part-time until 15th December, 1950, being transferred to this Laboratory for full-time duty on that date).

Attendants.—J. W. Foster, J. Fletcher, L. Hinds, A. V. Lynch, H. J. Moseley.

Sir,
I have the honour to present the following report on the work carried out in the Microbiological Laboratory during 1950.

The amount of revenue collected from charges for examinations, sale of media, etc., was £540 17s. 6d.

The number of laboratory examinations carried out during the year, compared with those of 1949, shows little variation, the respective figures being:

	1949	1950
General laboratory examinations	70,780	70,318
Examinations of rats for plague	1,306	1,811
	<hr/>	<hr/>
	72,086	72,129
	<hr/>	<hr/>

Diphtheria.

Both the number of swabbings and the number of tests for toxicity declined during the year, the former from 3,146 in 1949 to 1,924 in 1950, and the latter from 228 to 85. The reason for this latter decline was largely the great shortage of guinea-pigs which was present throughout the year.

Typhoid and Salmonella Infections.

There has been a slight increase in the total number of examinations in connection with salmonella infections, mainly due to the examination of urine and faeces in the search for carriers of *S. typhi*.

During the year two cases of infection with *S. Paratyphi B.* were encountered.

An interesting example of the detection of a typhoid carrier occurred in a small outbreak of typhoid fever which involved a family in the New Hebrides. The Department was asked whether they could help in the locating of the source of infection and agreed to do so. Cultures of faeces and urine from suspected persons were made in tetrathionate broth and forwarded by air to this Laboratory. *S. typhi* was recovered from one of the specimens of faeces.

Malaria.

During 1950 the number of slides submitted for examination for malarial parasites was thirty-two, compared with forty-one in 1949 and sixty-two in 1948. In five cases malarial parasites were found and in each instance the parasite was *P. Vivax*.

Gonorrhoea and Syphilis.

There has been a further decline in the number of smears submitted for examination for gonococci. Examinations in 1950 numbered 4,135, as against 5,166 in 1949. Complement deviation tests also decreased from 3,639 to 2,592. Ten years ago the number of slides examined for gonococci was well over 20,000 yearly. Wasserman reactions and Kahn tests numbered 22,320 and 21,558, compared with 22,964 and 20,467 respectively, in 1949. These numbers differ little from those of ten years ago. In order to assist the Division of Social Hygiene, the Serology Section of this laboratory undertook the quantitative Wasserman reaction, and during the year 2,341 examinations were carried out.

Milk.

The number of samples of milk submitted by the Milk Board for the determination of bacterial content was 2,983, compared with 1,523 in 1949 when, as I have previously pointed out, various interruptions to the work occurred. The number of samples submitted for examination for tubercle bacilli and *B. abortus* was 407 compared with 319 the previous year. In two instances the guinea-pigs developed tuberculosis and 91 pigs showed evidence of infection with *B. abortus*. Shortage of guinea-pigs to some extent hampered this work.

Accommodation.

Despite the fact that for years I have called attention to the shortage of accommodation, no action to remedy the situation has yet been undertaken.

The overcrowded conditions of the laboratory greatly hinder the present amount of work which is carried out and render impossible any extension of the laboratory's activities.

Table showing the Routine Examinations made for the various Branches of the State Department of Public Health, other Government Departments, Subsidised Hospitals, etc.

	Number of Examinations Comparative Statement.	
	1949.	1950.
Department of Public Health—		
Head Office Submissions	22,650	24,231
David Berry Hospital	26	72
Lideombe State Hospital and Home	1,304	1,270
Liverpool State Hospital and Home	340	432
Newington State Hospital and Home	25	22
Waterfall Sanatorium.....	52	267
Medical Officer of Health, Metropolitan District	2	19
Medical Officer of Health, Hunter River District	...	10
Randwick Auxiliary Hospital (T.B.)	293	342
Commonwealth Government	2,584	2,279
State Departments—		
Agriculture Department .....	...	...
Education Department	82	2
Child Welfare Department	2	84
Government Stores Department	17	10
Milk Board	1,842	3,397
Police Department	109	113
Prisons Department	559	423
Railway Department	12	...
Miscellaneous Government Departments	26	5
Private Practitioners	12,563	11,067
Public Hospitals and Institutions (other than State Hospitals)	14,801	12,840
Mental Hospitals	8,556	8,282
Municipal and Shire Councils	252	193
Rachel Forster Hospital	4,683	4,958
Total Examinations (General)	70,780	70,318
Rats for Plague	1,306	1,811
	72,086	72,129

In the following Statement the Routine Work is divided into sections to disclose the purposes for which the various examinations were made.

	Number of Examinations Comparative Statement.	
	1949.	1950.
A. MICROBIOLOGICAL EXAMINATIONS.		
1. Of materials from diseased persons and animals—		
Actinomyeosis	9	3
Brucella Abortus	35	30
Diphtheria Swabbings	3,146	1,924
Diphtheria Toxicity	228	85
Dysentery	29	80
Gonorrhoea (smears and urine)	5,166	4,135
Gonorrhoea Complement Deviation Test ...	3,639	2,592
Haemolytic Streptococci	361	156
Hydatids (sputa, smears, etc.)	4	3
Hydatid (Complement Deviation Test)	42	55
Leprosy (Human)	189	162
Malaria	41	32
Meningitis	10	8
Syphilis (Wassermann Reactions)	22,964	22,320
Syphilis (Quantitative Wassermann—only undertaken since January, 1950) .....	...	2,341
Syphilis (Kahn)	20,467	21,558
Syphilis (Spirochaetes)	736	462
Tetanus	5	7
Tinea (Monilia, etc.)	27	15
Tuberculosis	1,163	1,110
Typhoid (Widal Reaction)	64	51
Typhoid (Urine, Faeces)	58	131
Typhoid (Miscellaneous Water, Milk, etc.)...	5	1
Paratyphoid A and B	46	76
Typhus (Weil Felix)	14	16
Unclassified : “ no growths ” from pus, etc.	455	501

	Number of Examinations Comparative Statement.	
	1949.	1950.
Vincent’s Angina	70	39
Rat Leprosy .....	...	...
Glandular Fever (Paul and Bunnell)	24	14
2. Examinations for Anthrax—		
Human Beings	1	1
Shaving Brushes, etc. ....	...	...
Wool .....	...	1
3. Examinations of Materials, etc.	37	9
Chemical Closet Contents	2	...
Disinfectants (Rideal Walker)	21	14
Feathers .....	...	...
Soil	6	17
Waters	228	164
Waters from Swimming Baths	33	37
4. Examination of Foods for Bacterial Contamination, Bread, Ice-cream, etc.—		
Milk samples submitted by the Milk Board for examination for Tubercle Bacilli and Brucella Abortus	319	407
Milk samples for Bacteriological count submitted by the Milk Board	1,523	2,983
5. Examinations for Food Poisoning	201	151
B. PATHOLOGICAL EXAMINATIONS.		
1. Of Animals—		
Mammals .....	...	...
Fish .....	...	...
2. Of Body Fluids—		
Blood for full and differential count	1,250	931
Blood for sedimentation rate	10	14
Miscellaneous blood examinations	1	3
Blood typing	4	8
Chemical Examinations—		
Blood for Sugar	183	194
Blood for Sugar Tolerance	173	183
Blood for Urea Estimation	125	157
Blood for Creatinine	4	30
Serum Acid Phosphatase	197	145
Blood for Cholesterol.....	16	40
Blood for Fibrin, Globulin, Albumen	81	243
Urines for Sugar.....	48	85
Urines for Urea	98	68
Test Meal Specimens	604	583
Calc ulus	8	9
Miscellaneous Chemical Examinations	205	500
Cell Counts	392	357
Colloidal Gold Reaction	759	538
Protein, Globulin and Total Protein	456	362
Takata Ara	260	183
Chlorides	52	76
Miscellaneous Cerebro Spinal Fluids	22	24
Faeces	299	330
Urine (General Examinations)	472	420
3. Of Tissues for Histological Examination	2,749	2,103
C. EXAMINATION OF PARASITES.		
Ecto-parasites (Fleas, Ticks, etc.)	6	1
Endo-parasites (Round and Flat Worms, etc.)	105	102
Protozoa	11	...
Insects (Flies, Mosquitoes) .....	...	...
D. MEDICO-LEGAL EXAMINATIONS.		
Examination of Exhibits for Blood, Seminal Stains, etc.	122	124
E. EXAMINATION OF SPECIMENS FOR PREPARATION OF VACCINES AND MISCELLANEOUS EXAMINATIONS.		
Preparation of Autogenous Vaccines from sputa, urine, aene pustules, boils, wounds and other septic conditions	304	273
Trichomonas	16	9
Lotions and Mixtures .....	...	...
Utensil Swabs	353	11
Weil’s Disease.....	...	...
Miscellaneous (General).....	25	18
Spermatozoa	2	3
	70,780	70,318

The following table indicates the Rats and Mice destroyed and examined at Sydney and Newcastle during the year ending 31st December, 1950.

1950—Sydney.					1950—Newcastle.			
	<i>R. R. Rattus.</i>	<i>Rattus Nor- vegicus.</i>	<i>M. Mus- culus.</i>	<i>Total.</i>	<i>R. R. Rattus.</i>	<i>Rattus Nor- vegicus.</i>	<i>M. Mus- culus.</i>	<i>Total.</i>
January ...	72	95	2	169	...	...	...	...
February ...	65	127	...	192	...	...	...	...
March	69	102	...	171	...	...	...	...
April	23	59	...	82	...	...	...	...
May	53	166	3	222	...	...	...	...
June	74	129	1	204	...	...	...	...
July	53	98	2	153	...	...	...	...
August ...	76	137	2	215	...	...	...	...
September	20	93	...	113	1	2	...	3
October ...	22	73	4	99	1	1	...	2
November	26	61	...	87	2	1	...	3
December...	24	72	...	96	...	...	...	...
	577	1,212	14	1,803	4	4	...	8

E. L. MORGAN,
Director of Pathological Laboratories.

